Ver.20.5

Q5 HANDBOOK OF DEFINITIONS AND SOURCES

This is not a policy handbook; it is an instructional handbook.

New and/or revised material is blocked on the right by a solid line.

The Handbook lists items in numerical order, even though the Q5 order is not always numerical. This presentation makes it easier to locate a specific item definition.

The Master Class/Item List column headings are explained below. Some of the headings also appear on the data collection screens.

The definitions for the first six columns of the Q5 are: F = Food Stamp Active; Y = Food Stamp Closed; T = CalWORKs Active; C = CalWORKs two parent data (TANC); X = CalWORKs Closed; and R = Refugee. If an "X" appears in the column case type, the item is applicable to the case and will appear for all cases of that type.

The column titled "Required?" has three instructions: "Always"; "If Present"; and "No". This column is not instruction on how to complete a review; it is information on the internal consistency requirements for the vehicle (Q5) that conveys the review information. If the information is part of the case under review, it should be entered in the Q5 regardless of the headings in the "Required" column. The instructions are:

Always = This item must always be completed for every case. Failure to do so will result in a "completeness" edit.

If Present = This item must be completed if that item is part of the case under review or if any other "If Present" item in that class has been answered. If any "If Present" item has been answered, then all the other "If Present" in the class default to an "Always", and a failure to answer will result in a "completeness" edit. If no "If Present" item in the class has been answered, then a given "If Present" item can be left blank (if that data is not found in the case) without producing a "completeness" edit. However, a cross class edit may result from entries in other classes.

No = This item must be completed if that data is in the case under review. Many times these items are required because of some earlier entry. For example, item 130-0004 Citizenship Status is an "Always" required item. If it is coded "04" Legal Permanent Resident, then item 130-0006 Alien Documented (as well as several others) must also be coded even though it is a "No" required item. However, "No" required items will not produce a "completeness" edit if left blank. Nevertheless, either a cross class or an intra class edit may result from not completing a "No" item that is referenced to another data item.

The Group codes indicate which coresident persons are addressed by the class.

Group "A" persons are those in the AU and/or FSHH (MFG children are considered AU members, therefore group A), and those that have been excluded by penalty or sanction including felons). Group A also includes those erroneously included in the AU/FSHH and those erroneously excluded from the AU/FSHH.

Group "B" persons are those that would have been included in the AU and/or FSHH but are excluded for some reason other than SSI(noncitizen, etc.).

Group "C" includes family SSI recipients, older siblings, and non-needy caretaker relatives, as well as persons who live in the same residence but would not be included in the AU/FSHH for any reason (shared housing, roomers, etc.).

Group "D" persons are absent parents, authorized persons for food stamps, etc., there are no item entries for these persons, but they are listed on the face sheet and may be referenced in the comments section of a specific item.

The Q5 document is intended to fulfill both the federal reporting requirements for welfare reform and payment accuracy. Therefore, for items that are not explicit in their titles whether the data request is for case record information or field review findings, it is important that the reviewer consult the Handbook of Definitions and Sources to determine which is intended.

When verification is available and permissible from both the case record and the field review process, code the verification obtained from the field review in the item requesting verification source. For example: Item 111-0005

Attendance Verification Source, if the case record has a report card and the field reviewer has obtained current school verification, preference in coding is to be given to the field review source(s)

CLASS: 010 - FS CASE INFORMATION - ONE PER REVIEW

010-0001 Most Recent Opening

DEFINITION: Enter the month, day, and year of the initial certification for the current

uninterrupted period of program participation.

SOURCE: Case record.

010-0002 Prior Assistance

DEFINITION: Enter the code to indicate whether the FSHH has/has not received federal FS

benefits prior to the current certification period.

SOURCE: Case record.

010-0003 Most Recent Action

DEFINITION: Enter the month, day, and year the FSHH was certified or recertified for the

sample month. This is the date the CWD person with the authority to do so,

authorized the certification/recertification of the FSHH.

SOURCE: Case record.

010-0004 Type of Action

DEFINITION: Enter the code that reflects the kind of action taken on the case.

SOURCE: Case record.

010-0005 FS Case Classification

DEFINITION: Enter the code indicating the case classification. Do not use code two.

SOURCE: Case record.

010-0006 Months in Cert. Period

DEFINITION: Enter the number of months the FSHH has been certified in the current

certification or recertification period. Examples: January to December is 12

months; January to January is 13 months.

SOURCE: Case record.

010-0007 FS Allotment/Fed Prog

DEFINITION: Enter the amount of federal food stamps authorized by the CWD (prior to any OI

adjustment) for the FSHH in the review month. CFAP authorized amount is

captured in item 010-0016.

SOURCE: Case record.

010-0008 Received Expedited Services

DEFINITION: Enter the code indicating the FSHH's expedited service status for the initial

month of certification or recertification.

SOURCE: Case record.

010-0009 Authorized Representative

DEFINITION: Enter the code to indicate whether the FSHH did/did not have an authorized

representative to act on their behalf in the review month.

SOURCE: Case record.

010-0010 Disposition Code

DEFINITION: Enter the code that reflects the disposition of the case.

SOURCE: Field review.

010-0011 Review Findings/Fed Prog

DEFINITION: Enter the code that reflects the result of the federal food stamp review. Review

findings for CFAP are captured in item 010-0018.

SOURCE: Field review.

010-0012 Method of Issuance

DEFINITION: Enter the code that reflects the method of food stamp benefit issuance.

SOURCE: Case record.

010-0013 FS Case Type

DEFINITION: Enter the code to indicate the type of FS benefits received. For this item, NA

equals receipt of food stamps only from the federal program. PA households are those that receive CalWORKs/GA and either federal or CFAP food stamps for all members. Mixed households are those in which members receive either form of food stamps and some but not all members receive CalWORKs. Combined cases are those in which all members of the household receive CalWORKs and, at least one member of the household receives CFAP and one member receives federal food stamps. CFAP only cases are those in which no CalWORKs or federal food stamps are received, the household receives only CFAP benefits.

SOURCE: Case record.

010-0014 Correct FS Allotment/Fed Prog

DEFINITION: Enter the federal program FS authorized amount (prior to any OI adjustment) as

determined by the review process. The CFAP correct authorized amount is

captured in item 010-0017.

SOURCE: Field review.

010-0016 FS Allotment/CFAP

DEFINITION: Enter the amount of CFAP FS authorized by the CWD (prior to any OI

adjustment) for the FSHH in the review month. The federal program authorized

amount is captured in item 010-0007.

SOURCE: Case record.

010-0017 Correct FS Allotment/CFAP

DEFINITION: Enter the CFAP program authorized amount (prior to any OI adjustment) as

determined by the review process. The federal program correct authorized

amount is captured in item 010-0014.

SOURCE: Field review.

010-0018 Review Findings/CFAP

DEFINITION: Enter the code that reflects the results of the CFAP review. Review findings for

the federal program reviews are captured in item 010-0011.

SOURCE: Field review.

010-0019 Allotment Adjustment

DEFINITION: Enter the code indicating the reason for any adjustment to the amount initially

authorized for the review month. This is an "Always" item, enter code "1" if there

has been no adjustment to the allotment.

SOURCE: Case record.

010-0020 Amount of Allotment Adjustment

DEFINITION: Enter the amount of the allotment adjustment. If no adjustment, leave blank.

SOURCE: Case record. CLASS: 030 - CalWORKs CASE INFORMATION - ONE PER REVIEW

030-0001 CalWORKs Opening

DEFINITION: Enter the month, day, and year for which the first payment was made under the

most recent opening for this assistance cycle, ignoring breaks of three months or less. When the break is greater than three months, enter the date of reopening. An assistance cycle is a continuous spell of receipt of CalWORKs cash benefits unbroken by a period of nonassistance sufficient to require a new application for assistance. This applies to CalWORKs, therefore, the earliest date in this item would be 1/1/98. Code this for the case under review, not for any specific

person in it.

SOURCE: Case record.

030-0002 Prior Assistance

DEFINITION: Enter the code to indicate whether the AU has received CalWORKs benefits

prior to this assistance cycle. CalWORKs is only available in California and began on 1/1/98. An assistance cycle is a continuous spell of receipt of CalWORKs cash benefits unbroken by a period of nonassistance sufficient to

require a new application for assistance.

SOURCE: Case record.

030-0003 Most Recent Action

DEFINITION: Enter the month, day, and year of the most recent CalWORKs eligibility

determination or redetermination action taken on the case prior to the review

date. In no instance would this date be earlier than 1/1/98.

SOURCE: Case record.

030-0004 Type of Action

DEFINITION: Enter the code that reflects the most recent action taken on the case. Use code

4 if the monthly income report was used as the basis for a redetermination.

SOURCE: Case record.

030-0010 Disposition Code

DEFINITION: Enter the code that reflects the disposition of the case. If the case is not subject

to review because it has been discontinued due to employment, use code 9, this will default to code 2 for federal reporting as well as give the state valuable

information on employment discontinuances.

SOURCE: Field review.

030-0011 **Review Findings**

> **DEFINITION:** Enter the code that reflects the review findings.

SOURCE: Field review.

030-0014 CalWORKs Payment

> **DEFINITION:** Enter the amount of the review month CalWORKs payment prior to any

overpayment adjustment.

SOURCE: Case record

030-0015 Correct CalWORKs Payment

> Enter the amount of the review month CalWORKs payment as identified by the **DEFINITION:**

field review process.

SOURCE: Field review.

030-0016 AFDC/TANF Opening

> If the case under review has an opening date prior to CalWORKs (1/1/98), enter **DEFINITION:**

the month, day and year of that opening. In some instances this date may even precede TANF. If the most recent opening is the CalWORKs opening, this item

can be left blank.

SOURCE: Field review.

CLASS: 110 - AGE - ONE PER PERSON

110-0002 Age Verification Source

> **DEFINITION:** Enter the code to indicate the source used to verify DOB. For the purposes of

this item, a county birth abstract is equivalent to a birth certificate.

SOURCE: Case record or field review.

110-0005 Gender

> **DEFINITION:** Enter gender of each person AORD.

SOURCE: Case record or field review.

110-0006 Race/Ethnic Origin

> Enter the race or ethnic code of each family member. Use most specific code **DEFINITION:**

possible.

SOURCE: Field review or case record.

110-0008 State Born

> **DEFINITION:** Enter two digit code indicating the state born, or if born outside of one of the

United States, use code 61.

SOURCE: Case record or field review.

110-0009 Mo Marital Stat Birth of Child **DEFINITION:** Enter the code to indicate the marital status of the mother of this child at the time

of birth. Married includes both separated at the time of the birth and married to someone other than the biological father of the child. Not married includes divorced, annulled, death of spouse, common law, and never married. If the

child is adopted, enter the data for the adoptive mother.

SOURCE: Case record or field review.

110-0010 Child Born on Aid

> **DEFINITION:** Enter the code to indicate whether this child was born on CalWORKs (i.e., on 1-

01-98 or later and the AU was receiving CalWORKs). If the child was born subsequent to 1-01-98 and the family was not receiving CalWORKs, enter code 02 No. If this person was either born prior to 1-01-98 or not a child, (i.e., 18

years old or older), enter code 90 N/A.

SOURCE: Case record or field review.

CLASS: 111 - EDUCATIONAL LEVEL - ONE PER PERSON

111-0001 Attending School

DEFINITION:

Indicate whether the person is attending school AORD. Use standard program definitions of school attendance (e.g., if the review date falls during summer

vacation between grades, the person is considered to be attending school).

SOURCE: Case record or field review.

111-0002 School Level (Not Teen Parent)

> **DEFINITION:** Use the listed codes to indicate the appropriate school level AORD. Leave blank

for Teen Parents. The corresponding item for Teen Parents is 111-0011.

SOURCE: Case record or field review.

111-0005 Attendance Verification Source

> **DEFINITION:** Enter the code to identify the source used to complete items above.

SOURCE: Case record or field review.

111-0006 Cal-Learn Participant

> **DEFINITION:** Enter the code to indicate whether the aided student teen parent is (01) or is not

(02) registered for or participating in this program.

SOURCE: Case record.

111-0008 Teen Parent

DEFINITION:

Enter the code to indicate whether the 19-year-old (or younger) AU member is (01) or is not (02) a parent of a child in the AU AORD. If this is a food stamp only review and the teen is not receiving CalWORKs, the answer is 'No'. Do not consider the person to be a parent if the child is unborn. NOTE: Do not confuse this Federal-reporting requirement with the California legislation on Minor Parent

Disincentives that apply to 17 year olds (or younger).

SOURCE: Case record.

111-0009 Expected HS/Voc Grad Date

> **DEFINITION:** Enter the month and year of the expected graduation date for each family

member age 18 attending high school or vocational school. Leave blank for all

other aged persons.

SOURCE: Case record or field review.

111-0010 Highest Grade Completed

> **DEFINITION:** Enter the code to indicate the highest grade completed for each family member

AORD. For example: If the person was in the 11th grade AORD, that would be the grade in progress, the last grade completed (and correct entry for this item) is 10th grade. The codes for post secondary education apply to academic instruction only. Use code 14 to indicate an Associate of Arts degree, 16 for a Bachelor of Arts, 17 Master of Arts, 18 Doctorate of Philosophy (Ph.D.). Code 19 can be used of Doctorate of Medicine (M.D.) or Doctorate of Jurisprudence (J.D.). It is possible for a person to attend many years post secondary without the awarding of any degree. List only highest degree received. Code 20 applies only to persons old enough to have attended school but did not. For persons too young to have attended school, use code 'PK'. Use U.S. equivalent for education completed outside the country. If reviewer is not sure, ask recipient and use

best estimate.

SOURCE: Case record or field review.

111-0011 Teen Parent School Type

> **DEFINITION:** Enter the code to indicate the type of school attended by the minor (age 17 or

younger) parent, if none use code 09.

SOURCE: Case record or field review.

111-0012 Teen Parent Child Care Type

> **DEFINITION:** Enter the code to indicate the kind of child care used by this minor (age 17 or

younger) parent AORD.

SOURCE: Case record or field review.

111-0014 **Highest Degree Attained**

> **DEFINITION:** Enter the code to indicate the highest academic degree attained. Age is not a

consideration, i.e., if a child has a degree, advanced or otherwise, code it so. If no degree has been attained, leave this item blank. Code 1 includes High School Proficiency Test, the initials "NEDP" stand for "National External Diploma Program". An entry in this item should be consistent with item 111-0010.

Degrees earned outside the U.S. will be honored in this item. If an equivalent is

not apparent, ask the recipient and enter the best estimate.

SOURCE: Case record or field review.

111-0015 Immunization Verified

> **DEFINITION:** Indicate whether the age appropriate immunizations for the pre-school child

(defined in CalWORKs as a child under the age of six and not yet in

kindergarten) have (Y) or have not (N) been verified.

SOURCE: Case record.

111-0016 **Exempt Fm Immunization**

> Indicate whether the pre-kindergarten child under age six is (Y) or is not (N) **DEFINITION:**

exempt from CalWORKs immunization requirements.

SOURCE: Case record.

111-0017 Reason for Exemption DEFINITION: Enter the code indicating the reason for the child being exempt from CalWORKs

immunization requirements.

SOURCE: Case record.

111-0018 Good Cause Determination

DEFINITION: If there has been a failure to cooperate with the CalWORKs immunization

requirements, indicate whether a cause determination has (Y) or has not (N)

been made.

SOURCE: Case record.

111-0019 Good Cause No School Verif

DEFINITION: If there has been a failure to cooperate with the CalWORKs school attendance

verification requirements for the child in kindergarten through age 15, indicate

whether a cause determination has (Y) or has not (N) been made.

SOURCE: Case record.

111-0020 Teen Parent Resides With

DEFINITION: If a minor parent is present, enter the code to describe the relationship to the

adult in the household. The adult need not be aided (e.g. adult supervised group living, etc.). A minor parent is under 18 years old and has a child included in the CalWORKs AU (must have a child, being pregnant is not sufficient to meet the definition of minor parent). If the minor parent is age 17 or under, use codes 01 through 06. If 18 or 19 years old and the head of own AU or 17 and under and has an exemption, use code 99. If this is an error case where the minor parent neither lives in an appropriate setting nor has an exemption, again code 99 and

document in the narrative.

SOURCE: Case record or field review.

111-0021 Teen Parent Exemption

DEFINITION: Indicate whether the minor parent is exempt from the minor parent requirement of

living in an adult supervised setting.

SOURCE: Case record.

111-0022 Teen Exemption Type

DEFINITION: Enter the code indicating the reason the minor parent is exempt from minor

parent requirements. Use code 99 if the exemption is due to being age 18 or 19 (minor parents are age 17 or younger and must live in an adult supervised

setting).

SOURCE: Case record.

111-0023 School Attendance Penalty

DEFINITION: Indicate whether this person's (age 16 or older) needs have been deleted from the MAP

because of a school attendance penalty.

Source: Case record.

111-0024 Teen Parent Satisfactory Attendance

DEFINITION: Satisfactory attendance is to be defined by the educational institution that the

minor parent is enrolled in. If the minor parent is enrolled and there is no objective evidence of unsatisfactory attendance, or if contact with the institution does not produce evidence on unsatisfactory attendance, code this item "Y"

(Yes).

SOURCE: Case record or field review.

Immunization Penalty 111-0025

> **DEFINITION:** Indicate whether this person's needs have been deleted from the AU because of

an immunization penalty.

SOURCE: Case record.

CLASS: 120 - RELATIONSHIP - ONE PER PERSON

120-0001 Marital Status (Adult/Minor HH)

> **DEFINITION:** Enter marital status code for all adults (and for a minor if head of household)

AORD. All others (including minor AU members that are not head of household)

are to be coded 6 (NA).

SOURCE: Case record or field review.

120-0003 Caretaker Assigned by Court

> Indicate whether the nonparent caretaker has been established by court order. **DEFINITION:**

Code for each child to indicate whether the child's nonparent caretaker has been

assigned by the court. Documentation required (copy of the court order).

SOURCE: Case record or documentation obtained through field review process.

120-0005 Legally Adopted by Caretaker

> **DEFINITION:** Indicate whether the child has been legally adopted. Documentation required

(copy of the court order).

SOURCE: Case record or documentation obtained through field review process.

120-0007 Relationship to Youngest Child

> Enter the code indicating the relationship of this person to the youngest child in the AU. If the person is the youngest child in the AU, use code 7. If the person is **DEFINITION:**

a non-AU younger sibling, enter code 4.

SOURCE: Case record or field review.

CLASS 130: CITIZENSHIP AND ALIENAGE - ONE PER PERSON

130-0004 Citizenship Status

> **DEFINITION:** Enter the code for each family member. Indicate citizenship status AORD.

SOURCE: Case record, SAVE, or field review.

130-0005 Verif of Citizenship

> **DEFINITION:** Enter the code that reflects the documentation source used to verify U.S.

citizenship status AORD. Use code 90 "N/A" for noncitizens.

SOURCE: Case record or field review.

130-0006 Alien Documented

> **DEFINITION:** Indicate if documentation does/does not exist AORD for each alien family

member. This answer must be consistent with items 0004 and 0005.

SOURCE: Case record or field review. 130-0008 Type of INS Document

DEFINITION: Enter the code for the INS document used to determine legal alien status.

SOURCE: Case record or field review.

130-0009 Alien Name on Doc (If Diff)

DEFINITION: Enter the alien's name as listed on the INS document if different than recorded in

case record.

SOURCE: INS Document or SAVE document.

130-0010 Alien Registration No.

DEFINITION: Enter the alien registration number as shown on the document viewed.

SOURCE: INS Document or SAVE document.

130-0011 INS Section/Alien Admitted

DEFINITION: Enter the INS section under which the alien is admitted.

SOURCE: INS or SAVE document.

130-0012 Date Lawfully Admitted

DEFINITION: Enter the month, day and year the alien was lawfully admitted to the US.

SOURCE: INS Document.

130-0013 Expiration Date

DEFINITION: Enter the month, day and year the INS document expires.

SOURCE: INS Document.

130-0015 Verification Quarters Worked

DEFINITION: Enter source of verification for the 40 qualifying quarters of work.

SOURCE: Case record, SSA records, or field review.

130-0016 Alien Sponsor

DEFINITION: Indicate whether the alien has a sponsor.

SOURCE: Case record or field review.

130-0017 Needs Met by Sponsor

DEFINITION: State whether a sponsor is/is not meeting the needs of the alien family member

AORD.

SOURCE: Case record or field review.

130-0021 Primary Language

DEFINITION: Complete the item AORD based upon information provided by the family, or from

the case record if the information is available. When an interpreter is used for the interview, consider the language in which the interview was conducted to be the primary language of the interviewee. It is possible for primary language to be different among family members. A common example would be the parent(s) to be non-English speaking and the child(ren) participating fully in English

speaking public school.

The purpose of this item is to determine barriers to entering the labor force. Therefore, if a person can converse in English, but speaks another language to family members or friends, code English.

SOURCE: Field review or case record.

Number Qualifying Emp Quarters 130-0022

> **DEFINITION:** Enter the number of qualifying quarters of work that have been verified.

SOURCE: Case record, third party contact, or field review.

130-0023 Arrived before 8-22-96

> **DEFINITION:** Indicate whether the non-citizen family member entered the U.S. before 8-22-96.

INS document. SOURCE:

130-0026 Gender

> **DEFINITION:** Enter gender of each person AORD.

SOURCE: Case record or field review.

130-0027 Completed Citizenship Class

> DEFINITION: Indicate whether the non-citizen has completed a citizenship class by the review

SOURCE: Case record or field review.

130-0028 Filed for Citizenship

> **DEFINITION:** Indicate whether the non-citizen has filed for citizenship by the review date.

SOURCE: Case record or field review.

CLASS: 140 - RESIDENCY - ONE PER REVIEW

140-0006 County of Residence AORD

> DEFINITION: Enter the two digit county code of residence AORD.

SOURCE: Case record or field review.

140-0007 Intend to Remain in CA

> **DEFINITION:** Indicate whether the FSHH intends to remain in California.

SOURCE: Field review.

CLASS: 141 - RESIDENCY/INSTITUTION - ONE PER PERSON

141-0001 Institution Name

> DEFINITION: Enter the name of the institution the recipient is in AORD. If none, skip this

> > class.

SOURCE: Case record or field review. 141-0006 Institutional Status

> **DEFINITION:** Enter the code to indicate the type of institution.

SOURCE: Case record or institutional contact.

CLASS: 150 - HOUSEHOLD COMPOSITION - ONE PER PERSON

150-0001 Person Included in FSHH

> **DEFINITION:** Indicate whether the person was included in the FSHH (received FS benefits) by

the CWD in the review month.

SOURCE: Case record.

150-0003 Purchase/Prepare Food w/FSHH

> If this person is not a FSHH member, indicate whether he/she purchases and prepares food with the FSHH. If everyone in the residence is included in the **DEFINITION:**

FSHH, leave this item blank.

SOURCE: Case record or field review.

150-0004 Purchase/Prepare Cert

> **DEFINITION:** If the answer to item 150-003 is 'Yes', indicate whether a separate purchase and

prepare statement is on file in the case record or has been obtained through the field review process.

SOURCE: Case record or field review.

150-0005 Relationship to H/H

> **DEFINITION:** Enter the code to indicate the person's relationship to the head of the

CalWORKs/FS household. There can be only one head of household. The Head of Household must be an adult, aided or not (the only exception would be an emancipated teen parent, code 02). The code 05 "Parent" refers to the parent of the Head of Household. All codes refer to the person's relationship to

the Head of Household.

SOURCE: Case record or field review.

150-0007 Natural Child of Payee

> **DEFINITION:** Indicate whether the person is the natural child of the FSHH payee.

SOURCE: Case record or field review.

150-0008 Fleeing Felon in HH

> DEFINITION: Indicate whether the household contains a felon fleeing from arrest. Code "No"

> > or leave blank unless there is a positive indication to the contrary.

SOURCE: Case record or contact from a law enforcement agency.

150-0009 Probation/Parole Violtr in HH

> **DEFINITION:** Indicate whether the household contains a probation or parole violator. Code

"No" or leave blank unless there is a positive indication to the contrary.

SOURCE: Case record or contact from a law enforcement agency.

Person in AU 150-0010

> **DEFINITION:** Indicate whether the person was included in the AU by the CWD in the review

month. MFG children are considered to be in the AU.

SOURCE: Case record.

150-0012 Properly Included/Excluded

> **DEFINITION:** Based on the response to item 150-0010, indicate whether the person was

properly included or excluded from the AU.

SOURCE: Field review.

FS Case Affiliation/Box 1 150-0020

> **DEFINITION:** Enter the code to indicate whether the person receives food stamps and is under

> > review

SOURCE: Case record and field review.

150-0021 FS Case Affiliation/Box 2

> **DEFINITION:** Enter the code to indicate the non-food stamp benefit status of the person.

Code "4" is "adult assistance in the territories". This is a food stamp code from

item 42 on the old IRS data collection form.

SOURCE: Case record.

150-0023 Child Only Case

> **DEFINITION:** Enter 'Y' if there are no adults in the AU receiving benefits funded through

CalWORKs.

SOURCE: Case record.

150-0024 Mother Not in AU

> **DEFINITION:** If this child's mother is not in the AU, (or if she is still in the AU but her needs

have been deleted from the MAP) enter the code showing why. Do not complete this item for adults. Do not code this item for non-SSI "C" children. This is a

"No" Required item and can be left blank for adults.

SOURCE: Case record.

150-0025 Father Not in AU

> **DEFINITION:** If this child's father is not in the AU. (or if he is still in the AU but his needs have

been deleted from the MAP) enter the code showing why. Do not complete this item for adults. Do not code this item for non-"C" children. This is a "No" Required item and can be left blank for adults.

Case record. SOURCE:

150-0026 Caretaker Rel Not in AU

> **DEFINITION:** If this child's caretaker relative (other than mother or father) is not in the AU, (or

if he/she is still in the AU but her/his needs have been deleted from the MAP) enter the code showing why. NOTE: these codes are different than for mother and father, and while some of the exclusions are the same, they are coded differently. Do not complete this item for adults. Do not code the child's parents as caretaker relatives. Do not code for non-SSI "C" children. This is a "No" Required item and can be left blank for non-applicable persons.

SOURCE: Case record.

Child Not in AU 150-0027

DEFINITION:

If this child is not in the AU, (or if this child is still in the AU but his/her needs have been deleted from the MAP) enter the code showing why. Do not code for adults. Only code SSI children (code 01) from group "C" that could have been

included in the AU were it not for their SSI status.

SOURCE: Case record.

Properly Include/Exclud FSHH 150-0028

> Based on the response to item 150-0001, indicate whether the person was **DEFINITION:**

properly included or excluded from the FSHH.

SOURCE: Field review.

CLASS: 151 - SUPPLEMENTAL HH INFORMATION - ONE PER REVIEW

151-0001 Number of Parents Rec Assistance

> Enter the code that represents the number of parents in the AU that received CalWORKs in the review month. Do not count minor parents unless they are **DEFINITION:**

exempt from minor parent requirements.

CODE 1: Single parent family; i.e., there is only one parent receiving CalWORKs. This code is to be used even if there are two parents in the home

(but only one receives CalWORKs).

CODE 2: Two parent family; i.e., there are two aided parents in the AU. It is not

necessary for them to have a child in common.

CODE 3: No parent fam-Incl Caretaker; AU includes non-parent aided adult, such as an aunt, uncle, or grandparent as CalWORKs aided caretaker relative.

CODE 4: No parent fam-Child only; AU does not include any adult nor a minor child head-of-household. This code is for a child(ren) only AU even if there are

parents/adults (unaided) in the home.

SOURCE: Case record.

AU Head Cares for Disabled 151-0007

> **DEFINITION:** Indicate whether the head of the AU provides care for a disabled person

(whether the disabled person is aided or not).

SOURCE: Case record.

151-0008 Child in Common (2 Parent Fam)

> **DEFINITION:** Indicate whether any child in the AU has two parents (natural, adopted or step)

also in the AU.

SOURCE: Case record.

CLASS: 160 - EMPLOYMENT & TRAINING PROGRAMS - ONE PER PERSON

Sanction in Sample Month 160-0001

> **DEFINITION:** Indicate whether an AU/FSHH member who is required to work or engage in

work activity is/is not sanctioned in the review month for refusal to do so.

SOURCE: Case record, WTW/FSET file. 160-0004 Reason for Sanction

DEFINITION: If the answer to item 160-0001 above is Y., code the basis for the sanction.

SOURCE: Case record, WTW/FSET file.

160-0005 Good Cause Determination Made

DEFINITION: If item 0001 indicates that a sanction has been imposed on the AU member,

state whether a cause determination was/was not made by the county. Cause determinations for WTW exemption are addressed in item 160-0021, code 19.

SOURCE: Case record, WTW file.

160-0007 Employment/Train Prgm Status

DEFINITION: Enter the code to indicate employment or training status of the FSHH member.

The codes for this item are based on the federal coding manual. Code 17 is "current mandatory participant, not complying and not sanctioned". Code 18 is

"current mandatory participant, not in compliance and sanctioned".

Code numbers 20, 30, and 40, are not actual codes to be used, but are headings for the codes that follow in that series. Code 20 is the heading for mandatory participants and the following codes in the 20 series list their activities. Code 30 is the heading for volunteer participants (due to having a child under the age of six) and the following codes in the 30 series list activities for them. Code 40 is the heading for participant volunteers (exempt for reasons other than caring for a child under six) and the following codes in the 40 series list activities for them. Code 50 is an actual code indicating currently being exempt from food stamp work registration requirements. Use code 90 for persons under the age of 16.

SOURCE: Case record, FSET, or WTW contact.

160-0008 GAIN Registered

DEFINITION: It may take until 12/31/98 for all the public assistance recipients to be

transitioned to WTW. Use this item to document GAIN recipients that have yet to be transitioned into WTW. Items 160-0014 GAIN Exempt and 160-0015 GAIN Deferred are also activated for the WTW transition period, however they have little relevance at this time, and I recommend leaving those items blank. If the

person is in WTW, leave this and all the GAIN items blank.

SOURCE: Case record or GAIN file.

160-0014 GAIN Exempt

DEFINITION: See item definition 160-0021 for assistance in selecting an exemption code that

reflects the basis for the recipient's exempt status. NOTE: If the recipient is

WTW enrolled or WTW deferred, leave this item blank.

SOURCE: Case record or GAIN file.

160-0015 GAIN Deferred

DEFINITION: Enter the code to indicate the reason the person is GAIN deferred AORD. If the

recipient is WTW registered or WTW deferred, leave this item blank.

SOURCE: Case record or GAIN file.

160-0020 Welfare To Work Enrolled

DEFINITION: State whether the AU member is/is not enrolled in the WTW program. New

applicants must be WTW enrolled in order to be eligible, an appointment letter scheduling the person in for a WTW appraisal meets this requirement. There may be a WTW contract, appraisal or other WTW enrollment evidence on file.

SOURCE: Case record/WTW file.

160-0021 Welfare To Work Exemption

DEFINITION:

Select the code that reflects the basis for the AU member's WTW exempt status AORD.

Code 22: "School Attendance" applies to persons who are 16 or 17 years old (or 18 and graduating prior to his/her 19th birthday).

Code 23: "Disabled" applies to an individual who has a disability that is expected to last at least 30 days and that significantly impairs his/her ability to be regularly employed or participate in welfare-to-work activities.

Code 24: is the abbreviation for "Non-parent caretaker relative caring for a child who is a dependent or ward of the court, or a child at risk of placement in foster care".

Code 26: "Care for Child Under 6 Mo Old" may apply to a child up to 12 months old, i.e., on an individual basis the CWD may exempt the caretaker of a child up to 12 months of age. This exemption may only be applied once since the onset of CalWORKs on 1/1/98.

Code 27: "Pregnant" applies when it has been medically verified that the pregnancy impairs her ability to be regularly employed or participate in WTW activities. A pregnancy exemption may also be granted if the CWD determines that participation in WTW activities by the pregnant woman will not readily lead to employment or that a training activity is not appropriate.

Code 28: "Domestic Violence" applies when it has been determined that domestic violence in any form (spousal/child abuse) precludes WTW participation.

SOURCE: Case record/WTW file.

160-0023 Voluntary Participant

DEFINITION: Indicate whether this person is voluntarily enrolled in WTW AORD.

SOURCE: Case record/WTW file.

160-0025 Food Stamp Employment Status

DEFINITION:

Enter information on the current employment status of all FSHH persons age 16 and above. For persons under age 16, use code 90 N/A. Codes 01 - 06 refer to the number of hours currently worked per week, on the average, for all nonmilitary hired employees. Codes 10 - 13 refer to active duty military personnel, migrants, and full time self-employed persons (i.e., those engaged entirely or predominantly in self-employment activities on a regular basis). "Self-initiated education or training activities" (code 21) are those which were not assigned through CalWORKs or Food Stamp Employment and Training programs. If an individual is employed and is also participating in a training program or self-initiated education or training activity, code as employed. If an individual is unemployed and is also participating in a training program or self-initiated education or training activity, use code 20 or 21 as appropriate.

Use code 21 for 16 and 17-year-old students. Use code 22 only for persons aged 16 or 17, not in school and not working.

If a person's employment status is not described by any code and has never worked, use code 34 (new job entrant). If the person has a work history, then use code 32 (unemployed one year or less) or 33 (unemployed more than one year).

This item records review month data only. If a person started a job in the review month, worked 10 hours but will work 40 hours per week next month, next month is not the review month. In this example use code 02 (10-19 hours per week).

SOURCE: Case record, WTW/FSET file or field review.

160-0026 Mos Sanctioned in Last 12 Mo

> **DEFINITION:** Starting with the review month, count how many months out of the last twelve that

this person has been sanctioned for WTW reasons. The months do not have to

be consecutive or for the same reason. If none, enter zeros.

SOURCE: Case record/WTW file.

160-0027 Obtained Employment in Review Month

DEFINITION:

Indicate whether this person is a new job entrant in the review month. New job entrant in this item means obtaining a job in the review month and never having been employed before. It is not necessary to have received a check in the

review month.

SOURCE: Case record or field review.

CLASS: 161 - WORK RELATED ACTIVITIES - MANY PER PERSON

161-0001 Type of Work Activity

> **DEFINITION:** Enter the code to indicate the type of work activity engaged in by the age 16 or older AU member in the review month. For those under age 16, use code 90

CODE 01: UNSUBSIDIZED EMPLOYMENT: Paid employment for which an employer receives no governmental subsidy. This code includes selfemployment.

CODE 02: SUBSIDIZED PRIVATE SECTOR EMPLOYMENT: Paid employment in a private sector job that is subsidized by a governmental agency. subsidized employment, not on the job training. See code 05 for OJT.

CODE 03: SUBSIDIZED PUBLIC SECTOR EMPLOYMENT: Paid employment in

a public sector job that is subsidized by a governmental agency.
CODE 04: WORK EXPERIENCE (THIS INCLUDES WORK ASSOCIATED WITH THE REFURBISHING OF PUBLIC HOUSING): Work for an employer who does not pay the recipient. The intent is that the recipient learns work habits and develops a work history. Skill training may also occur on the job. There is no expectation that the employer will hire the individual at the end of the training period. This includes those who are current participants in Pre-employment Preparation (PREP) and Alternative Work Experience (AWEX), including those in This includes those who are current participants in Pre-employment private sector placements.

CODE 05: ON THE JOB TRAINING (OJT): Employment in which a government agency pays an employer to provide skill training to a participant on the job and the employer pays a wage to the participant. Most OJT placements are funded through some agency such as JTPA, a community based organization (CBO), the Private Industry Council, etc. For OJT funded by grant diversion, see code 19. CODE 06: JOB SEARCH/JOB READINESS ASSISTANCE: NOTE: DO NOT USE THIS CODE IF THE INDIVIDUAL HAS BEEN PARTICIPATING IN THIS ACTIVITY FOR 4 CONSECUTIVE WEEKS OR 6 WEEKS TOTAL WITHIN THE

PREVIOUS 12 MONTH SPELL ON AID OR SINCE AUGUST 22, 1996, WHICHEVER IS SHORTER. PARTICIPATION FOR 3 OR MORE DAYS DURING A WEEK SHALL BE CONSIDERED AS A WEEK OF PARTICIPATION. A variety of activities that prepare client to find their own jobs, including the following:

JOB CLUB: Job search workshops which are group training sessions where participants learn various job finding skills including training in basic job seeking skills, job development skills, job interviewing skills, understanding employer requirements and expectations, and how to enhance self-esteem, self-image, and confidence.

SUPERVISED JOB SEARCH: An organized method of seeking work including access to phone banks, job orders, and direct referrals to employers, which is overseen, reviewed and critiqued by a person who has been trained or has experience as an employment counselor.

UNSUPERVISED JOB SEARCH: Independently seeking work and making periodic progress reports to the CWD or agency contracting with the CWD.

CODE 08: VOCATIONAL EDUCATION TRAINING: NOTE: THIS CODE APPLIES ONLY TO AN INDIVIDUAL WHO HAS NOT EXCEEDED 12 MONTHS IN THIS ACTIVITY FOR EACH SPELL ON AID. TO DETERMINE A MONTH OF PARTICIPATION, COUNT THE NUMBER OF WEEKS ATTENDING VOCATIONAL EDUCATIONAL TRAINING AND DIVIDE THE TOTAL NUMBER OF WEEKS BY 4.3. Includes, but is not limited to, vocationally specific skill training in a classroom or on site setting. Examples include courses provided by local private industry council programs, ROP, community colleges, etc. Include self-initiated college in this code.

CODE 10: EDUČATION DIRECTLY RELATED TO EMPLOYMENT: Education directly related to employment in the case of an adult recipient who has not received a high school diploma or a certificate of high school equivalency. Includes adult basic education, English-as-a-Second-Language and GED. This code implies that the recipient has a job as soon as the educational requirement is met. For adult basic education as an activity in itself, see code 17.

is met. For adult basic education as an activity in itself, see code 17. CODE 11: SECONDARY SCHOOL: NOTE: THIS CODE APPLIES ONLY TO A TEEN HEAD OF HOUSEHOLD. Attendance at a secondary school or in a course of study leading to a certificate of general equivalence, in the case of a recipient who has not completed secondary school or received such a certificate. This includes education to obtain a high school diploma.

CODE 12: CHILD CARE/COMMUNITY SERVICE: The provision of unpaid childcare services to an individual who is participating in a community service program. Include those who provide unpaid childcare to participants in work experience. Note: Those who are paid to provide childcare must be coded either 01 - unsubsidized employment; 02 - subsidized private sector employment; or 3 - subsidized public sector employment.

CODE 13: JOB SKILLS TRAINING: Job skills training directly related to employment.

CODE 14: COMMUNITY SERVICE PROGRAMS: A temporary and transitional training activity performed in the public or private nonprofit sector under close supervision of the activity provider, and provides participants with basic job skills that can lead to employment while meeting a community need.

CODE 15: ADDITIONAL WORK ACTIVITIES PERMITTED UNDER WAIVER DEMONSTRATION: Do not use this code at this time.

CODE 16: OTHER WORK ACTIVITIES: Activities not listed in WTW regulation but allowed under the county plan as a qualifying work activity.

CODE 17: ADULT BASIC EDUCATION: Adult basic education consists of, but

CODE 17: ADULT BASIC EDUCATION: Adult basic education consists of, but not limited to, basic literacy, ESL, basic arithmetic, etc. This activity increases general employability and is not related to a need for a specific job that the recipient has been referred to (code 10).

CODE 18: PAID WORK STUDY: Work study employment may be in either the public or private sector, both on and off campus. Code unpaid work-study in work experience (code 04).

CODE 19: GRANT DIVERSION OJT: On-the-job training funded by the CWD with grant diversion monies. This is an activity that is considered to precede the granting of CalWORKs and divert the person away from welfare receipt. For OJT funded through some other source than grant diversion, see code 05.

CODE 20: SUPPORTED WORK/TRANSITIONAL EMPLOYMENT: Supported work and transitional employment are employment in a sheltered environment. This type of employment assists a person to make the transition to unsheltered, non-supported work.

CODE 21: DOMESTIC VIOLENCE SERVICES: Domestic violence services consist of anger management, workshops, counseling, and other services intended to either reduce the incidents of or alleviate the effects of domestic violence

CODE 22: MENTAL HEALTH SERVICES: Mental health services consist of workshops, counseling, therapy, and other mental health services intended to reduce barriers and enhance employability.

CODE 23: SUBSTANCE ABUSE SERVICES: Substance abuse services consist of workshops, counseling, therapy, drug testing, and other substance abuse services intended to reduce barriers and enhance employability.

CODE 24: PARENT SCHOOL PARTICIPATION: Parent school participation are those duties required by the school district of the child's parent to ensure that the child remains in school. Activities may include, but are not limited to, driving the child to school and monitoring recess activities.

CODE 99: OTHER WORK ACTIVITIES: Other WTW related activities that are not specifically addressed in the above codes.

SOURCE:

Case record, WTW file or third party verification. Use one or more of the following sources for verification:

- Third party verification information in writing or through interview with the employer or provider. Information must be clearly documented in class specific narrative.
- 2. Information in writing or through interview with the case manager, or other county staff with knowledge of the client's participation. Information must be clearly documented in class specific narrative.
- Automated county WTW systems. Counties may have the ability to access WTW records via county specific on-line systems. Information must be clearly documented in class specific narrative.

NOTE: Accept client's statement if unable to obtain the verification listed above. All attempts to obtain the verification must be documented in class specific narrative.

161-0002 Average Hours per Week

DEFINITION:

For each work activity in which the adult participated during the sample month, enter the average number of hours per week of participation. Do not include single parents under the age of 20 who are enrolled in a secondary school or the equivalent.

To calculate the average number of hours per week of participation in a work activity, add the number of hours of participation across all weeks in the month and divide by the number of weeks in the month. Round to the nearest whole number.

If the adult (not including single parent under the age of 20 who is enrolled in a secondary school or the equivalent) receives assistance for only part of a month, calculate the average number of hours of work activities in each full week the family received assistance in that month.

Some weeks have days in more than one month. Include such a week in the calculation for the month that contains the most days of the week (e.g., the week of the calculation).

of July 27 - August 2, 1997 would be included in the July calculation).

SOURCE:

Case record/WTW file/field review. Use the verification and documentation criteria described in item 161-0001.

161-0005 Adult Work Status

DEFINITION:

Enter the code to indicate the adult AU member's work status. "Unemployed, looking for work" refers to persons who are actively seeking work and considered in the in the labor force. "Unemployed, not looking for work" refers to persons who are not seeking work and therefore not considered in the labor force. Persons on temporary lay-off and not seeking other employment (i.e. waiting for recall), should be coded 90 N/A.

SOURCE: Case record or field review.

161-0006 Required to Participate

DEFINITION: Code this item "Y" if the adult AU member is not WTW Exempt as indicated in

items 160-0021 (or the corresponding GAIN items). If the AU member is under age 16, enter "N" and use code 90 N/A in the other class items that are "Always"

required.

SOURCE: Case record/WTW file. Use the verification and documentation criteria

described in item 161-0001.

161-0007 Hrs CalWORKs Employmt Activit

DEFINITION: Enter the number of hours of review month CalWORKs employment activity for

the activity listed in item 161-0001.

SOURCE: Case record, WTW file or third party verification.

161-0008 Welfare to Work Enrolled

DEFINITION: Code "Y" for everyone not sanctionedor exempt.

SOURCE: Agency records.

161-0009 Welfare to Work Exemption

DEFINITION: If exempt, select the code that reflects the basis for the AU member's WTW

exempt status as determined by the CWD WTW program worker.

CODE 01: Under age 16. CODE 02: Over age 59.

CODE 03 "School Attendance" applies to persons who are 16 or 17 years old (or 18 and graduating prior to his/her 19th birthday).

CODE 04 "Disabled" applies to an individual having a disability expected to last 30 days or more and that significantly impairs his/her ability to be regularly employed or participate in welfare-to-work activities.

CODE 05 "Pregnant" applies when it has been medically verified that the pregnancy impairs her ability to be regularly employed or participate in WTW activities. A pregnancy exemption may also be granted if CWD WTW determines that participation in WTW activities by the pregnant woman will not readily lead to employment or that a training activity is not appropriate.

CODE 06: "Care for an ill or incapacitated household". The ill or incap member does not have to be in the AU. WTW must determine that the caretaking responsibilities impair the recipient's ability to be regularly employed or to participate in WTW activities.

CODE 07 "Care for child 6 mo/less" may apply to a child up to 12 months old, i.e., on an individual basis the CWD may exempt the caretaker of a child up to 12 months of age. This exemption may only be applied once since the onset of CalWORKs on 1/1/98.

CODE 08 "Non-parent caretaker relative caring for a child who is a dependent or ward of the court, or a child at risk of placement in foster care." Applies only to the non-parent caretaker relative.

SOURCE: Agency records

161-0010 Obtained First Job in Review Month

DEFINITION: Indicate whether the person has obtained his/her first job in the review month. It

is not necessary to have received a check, just start to work. If it is the end of the month and the employer says "you're hired, start next week" and next week is next month, that is not starting this month, that is starting next month. If the start date is the last working day of the month and the person works one hour and goes home sick, code as "Yes", started work. Use rounding, if the person worked 30 minutes or more before going home sick, round up to one hour, if worked 29 minutes or less, round down and code no employment in the month.

This instruction applies to this item only.

SOURCE: Agency records or field review.

161-0012 Type of Work Activity

DEFINITION: Enter the code to indicate the review month type of work activity engaged in by

the nonexempt/exempt and participating AU member.

SOURCE: Agency records or field review.

Rev Mo Hrs CalWORKs Work Act 161-0013

> **DEFINITION:** Enter the number of review month hours the recipient was engaged in for the

type of work activity coded in item 161-0012 "Type of Work Activity". Do not make adjustments for sick leave, transportation problems, etc. Use the number of hours assigned by WTW, or if the activity is not assigned by WTW, ask the person "How many hours do you usually do that?" or the employer of training

hours is this person scheduled to do this?"

SOURCE: Agency records or field review.

161-0014 WTW Participation Status

> CODE 01: Nonexempt WTW participant. Skip item 161-0009 "WTW Exemption" **DEFINITION:**

and complete the rest of the class. Items 162-0023 and 161-0015 will accept

CODE 02: Exempt from WTW participation and not participating. Comlete ITEMS 161-0008 "Welfare Work Enrolled" and 161-0009 "Welfare to Work

Exemption", then skip the rest of this class.

CODE 03: Exempt from WTW participation but is participating in an activity

anyway. Complete all items in this class.

CODE 04: Nonexempt and sanctioned. Go no further in this class.

SOURCE: Agency records or field review.

161-0015 Average Hours Per Week CalWORKs Work Activity

DEFINITION:

Enter the average number of hours per review month week the person was engaged in for the type of work activity coded in item 161-0010 "Type of Work Activity". Do not make adjustments for sick leave, transportation problems, etc. Use the number of hours assigned by WTW, or if the activity is not assigned by WTW, ask the person "How many hours do you usually do that?" or the employer or training provider " How many hours does this person usually do

this? " or "How many hours is this person scheduled to do this? "

SOURCE: Agency records or field review.

161-0016 Adult Work Status

> **DEFINITION:** Every WTW adult (defined as age range 16 through 59) is either employed or

unemployed, and if unemployed either looking or not looking for work. Unless of course they are doing something else, specifically a non-wage training assignment as coded in 161-0010 "Type of Work Activity"".

If the WTW adult is in a wage paying work activity (161-0010 codes 01, 02, 03, 05), then code 01 "Employed". Persons engaged in some other countable WTW activity are presumed to be participating in order to ultimately seek and find employment, therefore, code non-wage paid participants as code 02 "Unemployed, Looking for Work". Those not engaged in any countable WTW work activity (161-0010 code 97 "None") and also not seeking employment, code

SOURCE: Agency records or field review.

CLASS: 162 - REGISTRANT REQUIREMENTS - ONE PER PERSON

Failed to Comply 162-0003

> **DEFINITION:** Enter the code to indicate the reason for a failure to comply decision.

SOURCE: Case record or FSET records.

Sanction Begin Date 162-0004

> **DEFINITION:** Enter the month, day and year of the beginning date of the sanction if it impacts

the review period.

SOURCE: Case record.

162-0005 Sanction End Date

> **DEFINITION:** Enter the month, day and year of the ending date of the sanction if it impacts the

review period. If this is an open ended sanction, i.e., the sanction ends when the

person complies, this item can be left blank.

SOURCE: Case record.

162-0007 Work Registration

DEFINITION:

Enter the code indicating this FSHH member's work registration status. Code "A" is the "work registered" code, the rest of the codes record the reason for food stamp work registration exemption. Code "H" indicates that the food stamp work registration requirement is met through CalWORKs.

SOURCE: Case/FSET record.

162-0008 Workfare Status

> **DEFINITION:** If the FSHH member is work registered, enter the code indicating workfare

> > status.

SOURCE: Case record or FSET records.

CLASS: 163 - VOLUNTARY QUIT - ONE PER REVIEW

163-0001 Date of Voluntary Quit

> Enter the day, month and year the FSHH member voluntarily guit his/her most **DEFINITION:**

recent employment if it impacts the review period. If there are no voluntary quit

issues, skip this class.

Case record/FSET file or field review. SOURCE:

163-0002 **Employer Name**

> **DEFINITION:** Enter the name of the employer from whom the FSHH member voluntarily guit.

SOURCE: Case record or field review.

163-0007 **CWD Good Cause Determination**

> **DEFINITION:** Indicate whether the county did (Y) or did not (N) make a cause determination.

SOURCE: Case or FSET records.

163-0010 **CWD Sanction**

> **DEFINITION:** Indicate whether the county did (Y) or did not (N) impose a sanction for a

voluntary quit that impacts the review period.

SOURCE: Case record.

163-0011 Sanction Begin Date

> **DEFINITION:** Enter the beginning month, day, and year of the sanction if it impacts the review

period.

SOURCE: Case record.

163-0012 Sanction End Date

> **DEFINITION:** Enter the end month, day, and year of the sanction if it impacts the review

period.

SOURCE: Case record.

CLASS: 164 - ABAWD - ONE PER PERSON

164-0001 ABAWD Exempt

> **DEFINITION:** Indicate whether the ABAWD is exempt from work requirements.

SOURCE: Case record.

164-01 Reason for Exempt Status

> **DEFINITION:** Enter the code indicating the reason for exempt status.

SOURCE: Case record.

164-01164-02 Work Requirement Met By

DEFINITION: Enter the code indicating the way in which the work requirements were met.

SOURCE: Case record.

Reason Reg Not Met 164-01164-03

> Enter the code indicating the reason the work requirements were not met. DEFINITION:

SOURCE: Case record.

164-0005 **ABAWD Status**

> **DEFINITION:** Enter the code indicating the FSHH member's ABAWD status AORD. If the

person is not an ABAWD, use code 2. Do not use code 9.

SOURCE: Case/FSET record.

CLASS 165 - FOOD STAMPS WORK RELATED ACTIVITIES - MANY PER PERSON - GROUP A

165-0001 Work Registration Status

> **DEFINITION:** Enter the code indicating the age 16 and older recipients' food stamp work

registration status for the review month. If the person is under age 16, enter code 90 "N/A" and skip the rest of the class. If the person is exempt and not a volunteer, enter code 06, make the appropriate entry in 165-0002 " Work Registration Exemption", then skip the rest of the class. If the person is CalWORKs registered, enter code 03, make the appropriate entry in item 165-0003 "Employment Status", then skip the rest of the class. If the status is code 01, 02, 04, or 05, complete the rest of the class as appropriate.

CODES 01 AND 02: Food stamp recipients that are mandatorily required to be registered in a food stamp employment and training program. Indicate whether they are (code01) or are not (code 02) registered. For those meeting the work activity registration requirement through CalWORKs, see code 03.

CODE 03: If this person is also a recipient of CalWORKs, and is enrolled in Welfare to Work in that program, enter code 03.

CODES 04 AND 05: Exempt food stamp recipients that have chosen to volunteer for Food Stamp Employment and Training (FSET) or the county's equivalent. Code 04 is for volunteers that are exempt because they have a child under the age of six. Code 05 for those exempt for all other reasons.

CODE 06: Enter this code for those who are exempt and have chosen not to volunteer for food stamp work activities.

CODE 07: Do not use this code at this time.

CODE 90: Enter code 90 for those under age 16 or over age 59. Enter code 03 in item 165-0002 "Work Registration Exemption".

SOURCE: Agency Records.

165-0002 Work Registration Exemption

DEFINITION: CODE 01: FSET has determined that the recipient is either physically of mentally unfit. Unfit due to pregnancy is split out in code 02.

CODE 02: FSET has determined that the recipient's pregnancy has temporarily made her unfit for employment activities.

CODE 03: Under age 16 or over age 59. There is not need to go any further in this class.

CODE 04: Needed in the home to care for another household member.

CODE 05: Relative or other caretaker of a dependent child under the age of six.

CODE 06: Meeting student eligibility requirements. MPP63-407.21(h).

CODE 07: Employed at least 30 hours per week or receiving weekly earnings at least equal to the Federal minimum hourly wage times 30. California minimum wage always meets or exceeds the federal minimum.

CODE 08: Recipient lives in an area too remote to benefit from FSET. CWDs establish their own parameters for remoteness.

CODE 09: Receiving or applied for unemployment compensation (UIB). If the recipient applied and was denied, this exemption is no longer valid.

CODE 11: Participating in a drug or alcohol treatment program.

Code 99: Other.

SOUCE: Agency records.

165-003 Employment Status

DEFINITION: Enter the code reflecting the employment status for those age 16 or older.

CODES 01 through 06: Average number of hours per week for all nonmilitary hired employees.

CODE 07: Active military personnel.

CODE 08: Migrant farm laborer.

CODE 09 and 10: Self-employment, either farming or not farming.

CODES 11, 12, AND 13: Not employed and participating in some kind of training or employment activity. Do not use code 13 at this time.

CODES 14,15, 16, AND 17: Unemployed and on temporary layoff, on strike or if none of the preceding, unemployed either more or less than one years.

Code 99: This includes people that have never had a job and are looking for their first one (and are not in training, codes 11 and 12).

SOUCE: Agency records and field review

165-0004 **Employment Training Program Status**

> **DEFINITION:** Enrolled in one of the following food stamp employment and training actives. If

the recipient is not enrolled in such a program, make no entry in this item. Self-initiated training is recorded in item 165-0003 code 11.

CODE 01: Training in job search technique, interviews, completing applications and search strategies.

CODE 02: Supervised job search. Frequently assigned after job search training.

CODE 03: Supervised job search combined with a work experience component.

CODE 04: Unpaid work experience in either public or private sector employment to learn work maintenance skills.

CODE 05: On the job training or CalWORKs grant diversion (grant diverted to an employer to provide a job) or work supplementation (some grant monies paid to an employer to provide a job).

CODE 06: Education leading to a high school degree including GED programs and GED preparation.

CODE 07: Post-secondary education leading to a degree or certificate.

CODE 08: Remedial education including adult education programs than GED preparation.

CODE 09: Vocational training administered through any program.

CODE 10: Mandatory participant not complying with FSET and not sanctioned.

CODE 11: Mandatory participant not complying with FSET and sanctioned.

Code 99: Other employment and training activities...

SOUCE: Agency records.

165-0005 Workfare Status

> CODE 01: Participating in a workfare program. Currently there are none in **DEFINITION:**

California.

CODE 02: Participating in a comparable workfare program. General assistance

programs should be coded her.

CLASS: 170 - SOCIAL SECURITY VERIFICATION - ONE PER PERSON

Each Group A person must have a Social Security Number entered in the SSN column of the people facesheet. If there is no verified SSN, enter the pseudo-SSN from MEDS. If neither of the above is available, enter nine sevens (77777777) as a Q5 pseudo SSN to avoid a fatal edit.

170-0002 Discrepancy with SSN

> **DEFINITION:** Indicate whether there is a discrepancy between the AU/FSHH member's SSN

listed in the case record and the IEVS verified SSN.

SOURCE: IEVS or SSA contact.

170-0003 SSN Verified

DEFINITION: Indicate whether the SSN has been verified through either IEVS or SSA contact.

SOURCE: IEVS or SSA contact.

170-0004 Application Submitted

DEFINITION: If the person does not have an SSN, indicate whether an application for a SSN

has been submitted to SSA. Then proceed to 170-0005.

SOURCE: Case record or SSA contact.

170-0005 Date of Application

DEFINITION: Enter month, day and year an application for SSN was received by SSA for

individuals without a SSN.

SOURCE: Case record or SSA contact.

CLASS 191 - CalWORKs SANCTIONS, PENALTIES, CAUSE/DETS - MANY PER PERSON

191-0001 Type of Action

DEFINITION: This class does not apply to volunteers.

Enter the code indicating the basis for or type of action under consideration in the review month. It is not necessary for the action to have been taken (e.g., a sanction/penalty issue could have been found to have been with good cause) for the appropriate items in this class to be completed. All sanctions and some penalties result in the individual's needs being taken out of the MAP. Other penalties result in a percentage reduction to the MAP.

The 25% MAP reduction penalties are imposed on the AU, and since this is a per person class, code them to the head of household.

Felons are broken out in codes 03 and 04.

CODE 01: Sanction. Actions that result in sanctions are WTW related and covered in codes 01 through 07 in item 191-0002 "Type of Saction/Penalty Issue".

CODE 02: Penalty. Actions that result in penalties are related to school attendance, immunizations, family support issues, and fraud.

CODE 03: Drug Felon. Ineligible for CalWORKs due to a drug related conviction. If the person is both a drug felon and fleeing, code as a drug felon.

CODE 04: Fleeing Felon. Ineligible for CalWORKs. Convicted felons fleeing to avoid felony prosecution or the consequences of parole/probation violation..

SOURCE: Agency records.

191-0002 Type of Sanction/Penalty Issue

DEFINITION: Enter the code indicating the issue as determined by WTW staff.

CODE 03: Recipient quit employment because he/she did not get a raise.

CODE 06: Recipient failed to provide required proof of satisfactory progress in any WTW activity.

CODE 07: Recipient either did not comply with the terms of the compliance plan or did not agree with the compliance plan itself.

CODE 08: Failure of the caretaker to assign child support rights to the county child support enforcement agency.

CODE 10: School attendance in grades one through twelve.

Code 11: Failure of the caretaker relative to cooperate with District Attorney staff on the determination of paternity/Maternity of the recipient child. This code, and code 12, are the only codes that apply to the percentage penalty reduction of

MAP.

CODE 12: Failure of the caretaker relative to cooperate with District Attorney staff in the child support enforcement process (25% penalty).

CODE 13: Use code 13 for those that have been taken out of the AU because of fraud.

CODE 90: Use code "90" for felons.

SOURCE: Agency records.

191-0003 Sanction/Penalty Cause Determination Finding

DEFINITION: CODES 01 through 13 apply to 191-0002 Issue codes 01 through 10. "GC"

means, "found to be with Good Cause for not meeting requirements". The rest of the code is the description of which specific reason the person was found to be with Good Cause. If the person was found not to have Good Cause for these

issues, use code 13.

CODES 14 and 15 apply to 191-0002 Issue code 08 assign support rights.

CODES 16 and 17 apply to 191-0002 Issue code 09 immunization.

CODES 18 and 19 apply to 191-0002 Issue code 10 school attendance.

CODES 20 and 21 apply to 191-0002 Issue codes 11 paternity/maternity

cooperation and 12 child support enforcement cooperation.

CODE 22: No determination has been made to decide if the issue identified in 191-0002 was not complied either with or without good cause.

CODE 90: Use this code for fraud and felony sanctions only.

SOURCE: Agency records.

191-0004 Sanction/Penalty in Review Month

> Identify whether there was either a sanction (code 01) or a penalty (code 02) **DEFINITION:**

imposed on the AU in the review month.

CODE 03: Use this code if the person was found to be with good cause and no

sanction/penalty was imposed.

CODE 04: Use this code if a sanction/penalty should have been imposed but

was not.

SOURCE: Agency records.

191-0005 Mo Sanction/Penalty in Last 12 Mo

> **DEFINITION:** Enter the number of months in the last twelve (starting with the review month as

month # 1) that the sanction/penalty has been in force.

SOURCE: Agency records.

191-0006 Amt Sanction/Penalty Reduction

> **DEFINITION:** Enter the amount of dollar cost to the AU as a result of the sanction or penalty.

SOURCE: Agency records, or if not available, computed by the field reviewer.

CLASS: 192 - HH COOP IN SUPPORT ACTIVITIES - ONE PER REVIEW

192-0001 Coop with Support Activities

DEFINITION: State whether the caretaker relative is cooperating with the Family Support

Division (FSD) AORD. If there are no absent parents, skip this class.

SOURCE: Case record.

192-0002 Sanction Imposed

DEFINITION: Indicate whether a sanction for failure to cooperate with FSD in child support

collection/assign support rights has been imposed that impacts the review

period.

SOURCE: Case record.

192-0003 Good Cause Determination Made

DEFINITION: Indicate whether a cause determination has been made prior to imposition of the

sanction.

SOURCE: Case record.

192-0005 Date Sanction Began

DEFINITION: Enter the month, day and year of the beginning date of the sanction impacting

the review period.

SOURCE: Case record.

192-0006 Sanction Ending Date

DEFINITION: If a sanction has been imposed that impacts the review period for failure to

cooperate with FSD, enter the end date of the sanction. Since this type of sanction is only lifted on compliance, and the item is completed only if the sanction period impacts the review date, enter a date only in instances where there has been an error and the end date is prior to the review month and the

person has not been added back into the AU.

SOURCE: Case record.

CLASS 194 - FOOD STAMP SANCTIONS AND CAUSE DETERMINATIONS

194-0001 Type of Sanction Issue

DEFINITION: Enter the code indicating the type of sanction issue as identified in agency

records. Code 05 is failure to "respond to a request for supplemental information

regarding employment status or availability for work".

CODES: 09 and 10 "felons"

SOURCE: Agency records.

194-0002 Sanction Cause Determination Finding

DEFINITION: Enter the code showing the results of the cause determination.

CODE 01: Found to be with good cause.

CODE 02: Found to be without good cause.

CODE 03: Cause determination not done.

CODE 90: N/A. Use this code for IPV and felons.

SOURCE: Agency records.

194-0003 Minimum Sanction Period

DEFINITION: All non-permanent sanctions are lifted on compliance, however, there are differing

minimum periods to be served before a sanction can be lifted by compliance. Enter the

code indicating the minimum sanction period.

Code 07: Enter this code if the person has a sanctionable issue, was found to be without good cause, (or N/A in the case of intentional program violaters and felons) but the

sanction was not imposed.

Code 90: Use this code when the person was found to have Good Cause (code 01 in item

194-0002).

SOURCE: Agency records.

CLASS: 211 - BANK ACCOUNTS - MANY PER PERSON

211-0001 Account Type

DEFINITION: Enter the code indicating account type.

SOURCE: Case record or field review.

211-0002 Account Number

DEFINITION: Enter account number for this account.

SOURCE: Case record or field review.

211-0003 Institution Name

DEFINITION: Enter the name of the institution.

SOURCE: Case record or field review.

211-0008 Balance AORD

DEFINITION: Enter the account balance.

SOURCE: Case record, field review or third party contact.

211-0009 Joint Account

DEFINITION: Indicate whether account is shared with another individual(s) not in the

AU/FSHH.

SOURCE: Case record, institution documentation or contact.

211-0011 Resource of Xclud Mem Avail

DEFINITION: Indicate whether the financial resource(s) of any excluded member(s) are

available to this family member.

SOURCE: Case record or field review.

211-0012 Signed/Dated CA86 on File

DEFINITION: Indicate whether there is a signed and dated CA86 (Agreement: Restricted

Account)in the case record establishing an exempt account.

SOURCE: Case record.

211-0013 Any Withdrawals From CA86 Account

> **DEFINITION:** Indicate whether there have been any withdrawals from the CA86 account in the

review period.

SOURCE: Case record or account documentation.

211-0014 **Unallowed Withdrawals**

> **DEFINITION:** Indicate whether withdrawals from the CA86 account have been of a type not

allowed under the exempt account regulation.

SOURCE: Case record or account documentation.

211-0015 CA86 Void Due to Client

> **DEFINITION:** Indicate whether the terms of the restricted account agreement have been

voided by client action.

SOURCE: Case record or field review.

CLASS: 212 - NONRECURRING LUMP-SUM PAYMENTS - MANY PER PERSON

Lump-Sum Type 212-0001

> Enter the code indicating the type of lump-sum received if it impacts the review period. If none, leave blank and proceed to the next class. **DEFINITION:**

SOURCE: Case record, IEVS, or field review.

212-0002 Lump-Sum Amount

> DEFINITION: Enter the amount of lump-sum income allocated to the budget month.

SOURCE: Case record or field review.

212-0003 Lump-Sum Receive Date

> **DEFINITION:** Enter the month, day, and year the lump-sum was received if it impacts the

review.

SOURCE: Case record or field review.

CLASS: 213 - OTHER LIQUID ASSETS/PER PROP - MANY PER PERSON

213-0003 Other Liquid Asses/Per Prop

> Enter the code indicating the type of resource owned by the family member **DEFINITION:**

AORD.

SOURCE: Case record or field review.

213-0004 **Date Acquired**

> **DEFINITION:** Enter the month and year the above referenced assets were acquired.

SOURCE: Case record or field review.

213-0005 Resource Value DEFINITION: State the gross value of the resource AORD.

SOURCE: Case record, field review, third party verification.

213-0006 Amount Owed

DEFINITION: State the amount owed AORD for the resource. SOURCE: Case record, field review, third party verification.

213-0007 Verification

DEFINITION: Enter the code indicating the type of verification for the existence, value and

amount owed for the resource AORD.

SOURCE: Case record, field review, third party verification.

213-0008 Exclusions Allowed

DEFINITION: Indicate whether the resource was excluded all or in part by the county from the

resource value determination AORD.

SOURCE: Case record.

213-0009 Net Value Amount

DEFINITION: State the net value of the resource AORD.

SOURCE: Case record, field review, third party verifications.

213-0010 Is There a Sponsor

DEFINITION: Indicate whether this alien has a sponsor.

SOURCE: Case record or field review.

213-0012 Trust Account

DEFINITION: Indicate whether the family member has a trust account AORD.

SOURCE: Case record or field review.

213-0014 Amount of Trust Funds Available

DEFINITION: State the verified amount of funds in this account available to the family member

AORD.

SOURCE: Case record or field review.

213-0015 Trust Petitioned by Court

DEFINITION: Indicate whether the court has been petitioned to make the trust funds available

to the family member.

SOURCE: Case record or field review.

213-0017 Earned Income Tax Credit

DEFINITION: Enter the code indicating whether the family member has EIC affecting the

review period.

SOURCE: Case record or field review.

213-0018 Sponsor's Net Countable Value

DEFINITION: Enter the sponsored alien's sponsor's net countable value AORD.

SOURCE: Case record or field review.

213-0019 Amount of Cash on Hand

> **DEFINITION:** Enter the amount of cash on hand AORD.

SOURCE: Field review.

CLASS: 221 - REAL PROPERTY - MANY PER PERSON

221-0001 Primary Residence

DEFINITION:

Indicate whether the real property owned by this family member is being used as the primary residence. If the answer is "Y", enter and go to the next class; if "N", complete the rest of this class. If no property is owned, leave blank and proceed

to the next class.

SOURCE: Case record or field review.

221-0007 Assessors Market Value

> **DEFINITION:** Enter the real property's assessed valuation for the current tax year.

SOURCE: Property tax statement.

221-0008 Balance Due on Property

> **DEFINITION:** Enter the balance due AORD on the real property.

SOURCE: Mortgage statement.

221-0009 Property Rented

> **DEFINITION:** Indicate whether the real property was rented in the budget month.

Case record or field review. SOURCE:

221-0010 Rent Received

> **DEFINITION:** Enter the amount of rent received during the budget month if the real property

was rented.

SOURCE: Case record or field review.

221-0013 Type of Property

> **DEFINITION:** Enter the code indicating the type of real property owned.

Case record or field review. SOURCE:

221-0014 Net Countable Property Value

> **DEFINITION:** Enter the amount of net countable property to be considered against the

property limits AORD.

SOURCE: Case record, field review, mortgage statement.

221-0015 Resource Exempt

> Indicate whether the property owned by the family member is exempt (Y) or **DEFINITION:**

nonexempt (N) from resource value consideration.

SOURCE: Food Stamp regulations.

221-0016 Property Ownership Verified

> **DEFINITION:** Indicate whether the ownership of the property in question has been verified.

SOURCE: Case record or field review.

CLASS: 222 - VEHICLE - MANY PER PERSON

222-0001 Vehicle Make

> **DEFINITION:** All vehicles contribution to the AU/FSHH resource limits must be evaluated. For

this item, enter the vehicle make (e.g., Ford, Chevrolet, etc.). If no vehicle, leave

blank and proceed to the next class.

SOURCE: Vehicle registration or DMV records.

222-0002 Vehicle Year

> **DEFINITION:** Enter the four digit (e.g. 1991 instead of 91) model year of the vehicle.

SOURCE: Vehicle registration or DMV records.

222-0005 Market Value

> **DEFINITION:** Enter the market value AORD for this vehicle. Do not consider any

encumbrance.

Case record, field review, "Blue Book" value, current newspaper advertisements, SOURCE:

auto dealer or other third party verification.

222-0010 Net Value

> **DEFINITION:** State the net (equity) value for this vehicle AORD by determining the market

value and subtracting any encumbrance.

SOURCE: Field review.

222-0014 Vehicle Use

> As of March 1998 reviews, enter the code indicating the exclusion status of the vehicle referenced in item 222-0001. Even if excluded, continue with the market **DEFINITION:**

and net value of the vehicle.

SOURCE: Field review.

222-0016 Countable Resource Value

> **DEFINITION:** Enter the amount contributed by this vehicle to the AU/FSHH's resource limit.

SOURCE: Field review.

CLASS: 223 - LIFE INSURANCE - MANY PER PERSON

223-0002 Type of Policy **DEFINITION:** If the AU member holds a life insurance policy with a cash surrender value

AORD, enter the code indicating the type of policy. If none, leave blank and

proceed to the next class.

SOURCE: Case record or insurance policy statement.

Available Value AORD 223-0007

> **DEFINITION:** Enter the cash surrender value of this policy AORD.

SOURCE: Insurance policy statement.

CLASS: 224 - OTHER NON-LIQUID RESOURCES - MANY PER PERSON

224-0001 Identify Resource

> **DEFINITION:** NOTE: This class duplicates the data in item 213-0001 (Other Liquid Asses/Pers

Prop) and can be skipped if you have entered the data there. If not, you can: Enter the code indicating the type of non-liquid resource owned by the family

member AORD.

SOURCE: Case record or field review.

224-0003 Net Countable Value

> **DEFINITION:** Enter the net amount AORD for the non-liquid resource to be counted toward

resource limits.

SOURCE: Case record, third party verification.

224-0005 Allowable Exclusion

> **DEFINITION:** Indicate whether the resource is excluded from program resource eligibility

SOURCE: Program manual regulations.

CLASS: 225 - COMBINED RESOURCES - ONE PER REVIEW

225-0002 Total Countable Value

DEFINITION:

Enter the amount in whole dollars of the total countable resources as determined by the field review process for the AU/FSHH under review. If this is an integrated review, use the CalWORKs total value. If total value is " "zero", this

class can be left blank.

SOURCE: Field review.

CLASS: 311 - WAGES AND SALARIES - MANY PER PERSON

311-0001 **Employer Name**

> **DEFINITION:** Enter the budget month employer's name.

SOURCE: Case record or field review.

311-0008 Hourly Wage

> **DEFINITION:** Enter the amount earned per hour by the employed family member in the budget

month. If paid on other than an hourly basis, convert to an hourly wage.

SOURCE: Case record or field review.

311-0012 **Rpt Budget Month Gross**

> **DEFINITION:** Enter the reported budget month gross earnings.

SOURCE: Case record.

311-0022 CWD Budget Month Income/FS

> **DEFINITION:** Enter the amount of budget month gross income to the FSHH used by the CWD.

SOURCE: Case record.

311-0023 Correct Budget Month Inc/FS

> **DEFINITION:** Enter the amount of budget month gross income to the FSHH as determined by

> > the review process.

SOURCE: Field review or employer contact.

311-0024 **Earnings**

> Enter the code indicating whether the family member had any earnings in the budget month that are countable to the AU/FSHH budget. If the answer is "No", **DEFINITION:**

enter the "No" code proceed to the next class.

SOURCE: Case record or field review.

311-0025 CWD Budget Mo Inc/CalWORKs

> **DEFINITION:** Enter the amount of budget month family gross earnings used by the CWD.

SOURCE: Case record.

311-0026 Correct Budget Month Inc/CalWORKs

> **DEFINITION:** Enter the amount of budget month family gross earnings used in the review

> > process.

SOURCE: Field review or employer contact.

311-0027 Date Employment Began

> **DEFINITION:** Enter the beginning month and year of this spell of employment. Determine the

beginning month disregarding breaks of one week (seven calendar days) or less of unemployment, also disregarding whether the employment has been for more than one employer. Enter this data for each person listed as having employment in the budget month. This is a "No" required item and will not generate an edit

by only completing it once per person.

SOURCE: Case record or field review.

CLASS: 312 - SELF-EMPLOYMENT - MANY PER PERSON

312-0001 Type of Self-Employment

> Enter the code indicating the type of budget month self-employment. If the answer is "None", enter code "97" and proceed to item 312-0023, another "Always" Required item. **DEFINITION:**

SOURCE: Case record or field review. 312-0003 Business Name

DEFINITION: Enter the name of the self-employed person's business.

SOURCE: Case record or field review.

312-0012 Days in Month Worked

DEFINITION: Enter the total number of days in the budget month in which the family member

engaged in some self-employment activity.

SOURCE: Case record or field review.

312-0013 Hours in Month Worked

DEFINITION: Enter the total number of hours in the budget month the family member engaged

in self-employment activities.

SOURCE: Case record or filed review.

312-0014 Rpt Budget Month Gross Amount

DEFINITION: Enter the reported gross dollar amount received in budget month.

SOURCE: Case record.

312-0015 Budget Month Expenses

DEFINITION: Enter the amount of the allowable business expenses incurred in the budget

month.

SOURCE: Case record.

312-0021 CWD Budget Mo Net Inc/FS

DEFINITION: Enter amount of budget month net self-employment income to the FSHH used

by the CWD.

SOURCE: Case record.

312-0022 Correct Budget Mo Net Inc/FS

DEFINITION: Enter the amount of budget month net self-employment income to the FSHH

identified through the review process.

SOURCE: Field review or third party contacts.

312-0023 Budget Mo Expense Applied

DEFINITION: Enter the code indicating the type of budget month self-employment expense

deduction allowed.

SOURCE: Case record.

312-0024 CWD Budget Month Net Inc/CalWORKs

DEFINITION: Enter the amount of budget month family net self-employment income used by

the CWD.

SOURCE: Case record.

312-0025 Correct Budget Mo Net Inc/CalWORKs

DEFINITION: Enter the amount of budget month family net self-employment income identified

through the review process.

SOURCE: Field review or third party contacts.

312-0026 Meets Minimum Wage Requirement

DEFINITION:

Indicate whether this self-employment meets or exceeds the minimum wage. Obtain the wage rate by dividing item 312-0025 "Correct Budget Month Net Income/CalWORKs" by 312-0013 "Hours in Month Worked". The minimum wage as of March 1998, is \$5.75 per hour.

SOURCE: Field review.

CLASS: 314 - OTHER EARNED INCOME - MANY PER PERSON

314-0001 Source of Income

> **DEFINITION:** Select the code that reflects the source of any other earned income received in

the budget month. If the answer is "None", enter code "97" and proceed to the

next class.

SOURCE: Case record or field review.

314-0008 Hourly Wage

> **DEFINITION:** Enter the hourly wage from the source listed in item 314-0001. Convert to hourly

if necessary.

SOURCE: Case record or field review.

314-0013 **Rpt Budget Month Gross**

> DESCRIPTION: Enter the reported gross amount of any other budget month earned income.

SOURCE: Case record.

314-0020 CWD Budget Month Inc\FS

> **DEFINITION:** Enter the amount of gross budget month income to the FSHH used by the CWD.

SOURCE: Case record.

314-0021 Correct Budget Month Inc\FS

> **DEFINITION:** Enter the amount of gross budget month other earned income to the FSHH

identified through the review process.

SOURCE: Field review or third party contact.

314-0022 SDI Received

> **DEFINITION:** Enter the amount of SDI received by the AU in the budget month. SDI for a

FSHH is recorded at item 336-0016.

SOURCE: Case record or field review.

CWD Budget Month Income\CalWORKs 314-0023

> **DEFINITION:** Enter the amount of budget month family gross income used by the CWD.

SOURCE: Case record. 314-0024 Correct Budget Month Inc\CalWORKs

DEFINITION: Enter the amount of budget month family gross income identified through the

review process.

SOURCE: Field review or third party contact.

CLASS 319 FS EARNED INCOME DEDUCTION - ONE PER REVIEW

319-0001 Amt El Deduct CWD Allowed/FS

DEFINITION: Enter the amount of the 20% earned income deduction that was allowed by the

CWD in computing the review months allotment. This is the amount obtained by multiplying the budget month gross earned income, or the budget month net self

employment income.

SOURCE: Case record.

320-0002 Correct Amount El Deduction

DEFINITION: Enter the amount of the food stamp earned income deduction as determined by

the review process.

SOURCE: Field review.

CLASS 320 CalWORKs INCOME DISREGARD - ONE PER REVIEW

320-0006 CWD Amt 50% E.I. Disregard

DEFINITION: Enter the CWD amount of the 50% earned income disregard.

SOURCE: Case record.

320-0007 CWD Amt \$225 Disregard DBI

DEFINITION: Enter the amount of the \$225 disregard that was applied to disability based

income by the CWD.

SOURCE: Case record.

320-0008 CWD Amt \$225 Disregard EI

DEFINITION: Enter the amount of the \$225 disregard that was applied to earned income by

the CWD.

SOURCE: Case record.

320-0009 Correct Amt \$225 Disregard DBI

DEFINITION: Enter the amount of the \$225 disregard that was applied to disability based

income by the QC reviewer.

SOURCE: Case record.

320-0010 Correct Amt \$225 Disregard EI

DEFINITION: Enter the amount of the \$225 disregard that was applied to earned income by

the QC reviewer.

SOURCE: Field Review.

320-0011 Correct Amt 50% El Disregard

DEFINITION: Enter the amount of the 50% earned income disregard identified by the review

process.

SOURCE: Field review.

CLASS: 322 - WORK RELATED EXPENSE - ONE PER PERSON

322-0001 Expense Allowed

DEFINITION: This class applies only to applicants, not recipients. Indicate whether the county

did/did not allow the work related expense deduction for the CalWORKs applicant. If the applicant had no earned income, this class can be left blank and

then proceed to the next one.

SOURCE: Case record.

322-0002 Amount allowed

DEFINITION: Enter the amount of work related expense allowed by the CWD to determine

eligibility for the CalWORKs applicant.

SOURCE: Case record.

CLASS: 323 - CHILD OR DEPENDENT CARE - ONE PER REVIEW

323-0001 Deduction Received

DEFINITION: Enter the amount of the budget month child care deduction used by the CWD. If

the child care expense was subsidized or reimbursed, enter the data in class

327. If there was no child care expense, leave this class blank.

SOURCE: Case record.

323-0002 Entitled to Deduction

DEFINITION: Indicate whether the AU/FSHH was entitled to a child care deduction in the

budget month.

SOURCE: Field review.

323-0003 Reason for Deduction

DEFINITION: Enter the code indicating the reason the child care deduction was allowed.

SOURCE: Case record.

323-0004 Correct Deduction Amt

DEFINITION: Enter the amount of budget month child care deduction as determined by the

field review process.

SOURCE: Field review.

323-0005 Recvd Fed Funded Child Care

DEFINITION: Indicate whether the AU/FSHH received federally funded child care.

SOURCE: Case or agency records.

CLASS: 324 - CHILDTYPE CARE\ADULT DEP COST - MANY PER PERSON

324-0002 Number of Months Recd Child Care

DEFINITION: Starting with the budget month, enter the number of months this child received

unsubsidized child care in the previous twelve months. Only count the months of child care during which the child was also receiving cash assistance. Do not

count back beyond 11/96.

SOURCE: Case/agency records or field review.

324-0010 Type of verification

DEFINITION: Enter the code for the type of child care cost verification.

SOURCE: Case record or field review.

324-0011 Amt Pd to Provider for Child

DEFINITION: Enter the amount of child care paid to the provider in the budget month for this

child

SOURCE: Case record or field review.

324-0012 Child Care Hrs in Month

DEFINITION: Enter the number of budget month hours this child received child care.

SOURCE: Case record or field review.

324-0021 Amt Pd to Provider for Adult

DEFINITION: Enter the code indicating the amount paid by the FSHH in the budget month to

the provider of adult care services.

SOURCE: Case record or field review.

CLASS 327 - SUBSIDIZED CHILD CARE - MANY PER PERSON

327-0001 Type of Child Care

DEFINITION: Enter the code indicating the type of federally subsidized child care received by this child in the budget month. The child must be 13 or younger and not a teen

this child in the budget month. The child must be 13 or younger and not a teen parent. If none (code 97), proceed to the next class. A parent caring for his/her child is not considered a "Type of Child Care" and is to be coded 97 None. The childcare must be necessary for employment, training, or WTW activities, not for correctional absorbing a sampler employment.

recreational, shopping, or similar activities.

CODE 1: SMALL FAMILY HOME (LICENSED): This provider type is licensed for

up to and including eight children in the provider's home.

CODE 2: LARGE FAMILY HOME (LICENSED): This provider type is licensed for

up to and including 14 children in the provider's home.

CODE 3: CENTER (LICENSED): Care provided in a non-residence setting.

Elementary schools with day care programs are included in this category.

CODE 4: CHILD'S HOME BY RELATIVE (NO LICENSE): Care provided in the

child's home by an unlicensed relative.

CODE 5: CHILD'S HOME BY NON-RELATIVE (NO LICENSE): This provider

type provides day care services inside the child's home by a non-relative.

CODE 6: FAMILY CHILD CARE HOME RELATIVE (NO LICENSE): A provider who is at least 18 years of age and either a grandparent, great-grandparent, aunt, uncle, or sibling. In order for a sibling (over 18 years old) to either be paid or

eligible to be paid as a provider of child care, the sibling must be living outside the home. A family home day care provider can take care of their own children and the children of one other family without obtaining a license.

CODE 7: FAMILY CHILD CARE HOME NON-RELATIVE (NO LICENSE): A family home day care provider can take care of their own children and the children of one other family without obtaining a license. If the provider takes care of a second family's child(ren) they are supposed to obtain a child care license.

CODE 97: None. CODE 99: Other.

SOURCE: Case record, field review or third party contact.

327-0002 Amt Subs Child Care this Prov

> **DEFINITION:** Enter the amount of the budget month child care subsidy received by this

provider of child care for this child.

SOURCE: Case or agency records.

327-0003 Amt Copay this Provider

> **DEFINITION:** Enter the amount of budget month copayment paid or required to be paid to this

provider for this child by the caretaker relative.

SOURCE: Case record or field review.

327-0004 Number Hrs this Provider

> **DEFINITION:** Enter the number of budget month hours of child care for this child by this

provider.

SOURCE: Case record or field review.

327-0005 Total Mos Subs Child Care this Prov

> **DEFINITION:** Enter the number of months of subsidized child care by this provider for this

> > child, start with the budget month and count back to and including 11/96.

SOURCE: Case or agency records.

327-0006 Reason Sub Child Care this Prov

> **DEFINITION:** Enter the code indicating the reason this child received subsidized child care

from this provider. Frame your answer in terms of which of the five coded activities the caretaker was enabled to participate in due to receiving subsidized

child care.

SOURCE: Case record or WTW/FSET file.

CLASS: 331 - RSDI - ONE PER PERSON

331-0002 Rpt Amount Recd in Budget Mo

> Enter the amount reported by the family member of any RSDI received in the budget month. Note that this (and similar classes) are an 'if present' entry. **DEFINITION:**

Entering zeros will result in an edit for 'incomplete items - source of verification'. The correct entry for 'no benefits received' is no entry, then proceed to the next

class.

SOURCE: Case record. 331-0006 Source of Verification

DEFINITION: Enter the code which indicating the source used to verify the amount of

payment.

SOURCE: Case record.

331-0007 Name of Payee

DEFINITION: Enter the name of the household member who was RSDI payee in the budget

month.

SOURCE: Case record, SSA contact.

331-0011 CWD Budget Month Income/FS

DEFINITION: Enter the amount allocated to the FSHH by the CWD.

SOURCE: Case record.

331-0012 Correct Budget Mo Income/FS

DEFINITION: Enter the amount of RSDI allocated to the FSHH as identified by the review

process.

SOURCE: Field review or SSA contact.

331-0013 CWD Budget Month Income/CalWORKs

DEFINITION: Enter the amount of RSDI used by the CWD.

SOURCE: Case record.

331-0014 Correct Budget Month Inc/CalWORKs

DEFINITION: Enter the amount of budget month RSDI as identified by the review process.

SOURCE: Field review or SSA contact.

CLASS: 332 - VETERANS BENEFITS - ONE PER PERSON

332-0001 Rpt Amount Recd in Budget Mo

DEFINITION: Enter the amount of veteran benefits reported in the budget month by this

person. Leave blank if none received and proceed to the next class.

SOURCE: Case record.

332-0002 Source of Verification

DEFINITION: Enter the code indicating the source of verification.

SOURCE: Case record.

332-0007 CWD Budget Month Income/FS

DEFINITION: Enter the amount allocated to the FSHH by the CWD.

SOURCE: Case record.

332-0008 Correct Budget Month Inc/FS

> **DEFINITION:** Enter the amount of budget month income allocated to the FSHH identified in the

review process.

SOURCE: Field review or VA contact.

332-0009 CWD Budget Month Income/CalWORKs

> **DEFINITION:** Enter the amount of Veteran's benefits used by the CWD.

SOURCE: Case record.

Correct Budget Month Inc/CalWORKs 332-0010

> **DEFINITION:** Enter the amount of budget month benefits identified in the review process.

SOURCE: Field review or VA contact.

CLASS: 333 - SSI - ONE PER PERSON

333-0013 Amount Received

DEFINITION:

Enter the amount received in the budget month. Code to the SSI eligible person. Enter data only for those group "C" persons that were excluded from the AU/FSHH due to receipt of SSI and group "A" persons erroneously included. Leave blank if none received and proceed to the next class.

SOURCE: Case record, field review.

333-0014 Source of Verification

> DEFINITION: Enter the code indicating the source used to verify the amount of payment.

SOURCE: Case record, field review.

CLASS: 334 - UNEMPLOYMENT COMPENSATION - ONE PER PERSON

334-0001 Rpt Amount Recd in Budget Mo

> Enter the reported amount of budget month UIB. Leave blank if none received and proceed to the next class. If received but not reported, enter zero and **DEFINITION:**

proceed with the rest of the class items.

SOURCE: Case record.

334-0002 Source of Verification

> **DEFINITION:** Enter the code indicating the source used to verify the amount of

> > payment.

SOURCE: Case record or field review.

334-0010 CWD Budget Month Income/FS

> **DEFINITION:** Enter the amount allocated to the FSHH by the CWD.

SOURCE: Case record.

Correct Budget Month Inc/FS 334-0011

DEFINITION: Enter the amount of budget month UIB allocated to the FSHH as identified

through the review process.

SOURCE: Field review or UIB office contact.

334-012 CWD Budget Month Income/CalWORKs

DEFINITION: Enter the amount used in the budget month by the CWD.

SOURCE: Case record.

334-0013 Correct Budget Month Inc/CalWORKs

DEFINITION: Enter the amount of budget month UIB identified through the review process.

SOURCE: Field review or UIB office contact.

CLASS: 335 - WORKER'S COMPENSATION - ONE PER PERSON

335-0001 Rpt Amount Recd in Budget Mo

DEFINITION: Enter the amount of worker's compensation payments reported received in the

budget month. Leave blank if none received and proceed to the next class.

SOURCE: Case record.

335-0002 Source of verification

DEFINITION: Enter the code indicating the source verifying receipt of worker's compensation.

SOURCE: Case record.

335-0012 CWD Budget Month Inc/CalWORKs

DEFINITION: Enter the budget month amount of worker's compensation used by the CWD.

SOURCE: Case record.

335-0013 Correct Budget Mo Inc/CalWORKs

DEFINITION: Enter the budget month amount of worker's compensation used by the QC

reviewer.

SOURCE: Field review.

335-0014 CWD Budget Month Income/FS

DEFINITION: Enter the budget month amount of worker's compensation used by the CWD.

SOURCE: Field review.

335-0015 Correct Budget Month Income FS

DEFINITION: Enter the budget month amount of worker's compensation used by the QC

reviewer.

SOURCE: Field review.

CLASS: 336 - OTHER GOVERNMENT BENEFITS - MANY PER PERSON

336-0001 Other Government Benefits

DEFINITION:

Enter the code to indicate the type of benefit received. SDI CalWORKs is item 314-0022, SDI Food Stamps is item 336-0016. Code 06 is the income data for paid work-study, the work activity count is recorded in item 161-0001. Leave

blank if none received and proceed to the next class.

SOURCE: Case record or field review.

336-0002 Rpt Amount Recd in Budget Mo

> **DEFINITION:** Enter the reported amount received by this person for the type listed in item 336-

0001 in the budget month.

Case record. SOURCE:

336-0003 Source of Verification

> **DEFINITION:** Enter the code indicating the verification source of benefit amount listed in item

336-0001.

SOURCE: Case record or field review.

336-0014 CWD budget Month Income/FS

> Enter the amount allocated to the FSHH by the CWD for the type listed in item **DEFINITION:**

336-0001.

SOURCE: Case record.

336-0015 Correct Budget Month Inc/FS

> Enter the amount allocated to the FSHH as identified by the review process for **DEFINITION:**

the item 336-0001 type.

SOURCE: Field review, IEVS or third party contact.

336-0016 SDI Amt Received

> **DEFINITION:** Enter the budget month SDI allocated to the FSHH. SDI for a CalWORKs case is

listed in item 314-0022. SDI income is treated differently in each program,

therefore, in integrated cases an entry will be required in both items.

SOURCE: Case record or field review.

336-0017 CWD Budget Month Income/CalWORKs

> **DEFINITION:** Enter the amount used by the CWD for the type listed in item 336-0001.

SOURCE: Case record.

336-0018 Correct Budget Month Inc/CalWORKs

> **DEFINITION:** Enter the amount of OGB received in the budget month as identified by the

review process for the item 336-0001 type.

SOURCE: Field review, IEVS or third party contact.

CLASS: 342 - CONTRIBUTIONS - MANY PER PERSON

342-0006 **Direct Support Amount**

> **DEFINITION:** Enter the amount of direct child support received from the absent parent(s) for

this child in the budget month.

SOURCE: Case record.

342-0007 Direct Support Date

DEFINITION: Enter the budget month, day and year of the direct child support was received.

SOURCE: Case record.

342-0008 Direct Disregard Amount

DEFINITION: Enter the amount of direct child support that was disregarded by the CWD.

SOURCE: Case record.

342-0009 Direct Disregard Date

DEFINITION: Enter the month, day and year of the CWD budget allowing the direct disregard

amount referenced in item 342-0008.

SOURCE: Case record budget documents.

342-0013 Name of Contributor

DEFINITION: List the names of any persons and/or organizations, which provided a

contribution in the budget month. Do not list absent parent direct child support contributors. If there is an entry in item 342-0006 and you wish to record the name of the absent parent child support contributor, you can do so in the case

narrative.

SOURCE: Case record.

342-0014 Evidence of Contribution

DEFINITION: Select the code that best documents the contribution received in the budget

month from the source listed in item 342-0013.

SOURCE: Case record.

342-0015 Rpt Amount Received in Budget Mo

DEFINITION: Enter the reported dollar amount of any contribution referenced in item 342-

0013 that was received in the budget month.

SOURCE: Case record.

342-0019 CWD Budget Month Income/FS

DEFINITION: Enter the amount allocated to the FSHH by the CWD.

SOURCE: Case record.

342-0020 Correct Budget Month Inc/FS

DEFINITION: Enter the amount allocated to the FSHH as identified by the review process.

SOURCE: Field review or third party contact.

342-0021 Child Support Disregard

DEFINITION: Enter the amount of child support disregard received by the FSHH from the

Family Support Division in the budget month.

SOURCE: Case or agency records.

342-0022 Disregard Received

DEFINITION: Enter the budget month, day, and year the child support disregard was received

by the FSHH.

SOURCE: Case record or agency records.

342-0023 CWD Budget Month Income/CalWORKs

DEFINITION: Enter the amount used by the CWD.

SOURCE: Case record.

342-0024 Correct Budget Month Inc/CalWORKs

DEFINITION: Enter the amount contributed in the budget month as identified through the

review process.

SOURCE: Field review or third party contact.

CLASS: 343 - DEEMED INCOME - ONE PER PERSON

343-0001 Sponsor's Name

DEFINITION: Enter the name of the alien's sponsor. If none, leave blank and proceed to the

next class.

SOURCE: Case record.

343-0002 Sponsor's Income

DEFINITION: Enter the dollar amount of the sponsor's and his/her spouse's budget month

income. This is not applicable when the sponsor is an organization.

SOURCE: Case record.

343-0004 Name of Contributor

DEFINITION: Enter the name of the person contributing to the FSHH other than an alien

sponsor.

SOURCE: Case record.

343-0005 Evidence of Contribution

DEFINITION: Enter the code to indicate the source verifying a contribution.

SOURCE: Case record.

343-0006 Rpt Amt of Contrib in Budget M

DEFINITION: Enter the amount reported by the FSHH as contributed in the budget month.

SOURCE: Case record.

343-0007 Date of Contribution

DEFINITION: Enter the budget month, day and year the contributed amount was received by

the FSHH.

SOURCE: Case record.

CWD Budget Month Income 343-0008

> Enter the amount allocated to the FSHH by the CWD. DEFINITION:

SOURCE: Case record.

343-0009 Correct Budget Month Income

> Enter the amount allocated to the FSHH in the budget month as identified **DEFINITION:**

> > through the review process.

SOURCE: Field review.

CLASS: 344 - CalWORKs - MANY PER REVIEW

344-0002 Amt Received Review Month

> **DEFINITION:** Enter the amount of CalWORKs benefits received for the review month for each

type listed in item 344-0022. Total each type of benefit for amount, e.g., If the AU received a warrant and then a supplemental warrant, use the total of the cash benefits in the series for code 01 (cash assistance). Enter the amount actually received by the recipient, i.e., the amount after any overpayment adjustments, penalties or sanctions. If the FSHH contains more than a single

AU, that amount of CalWORKs for the other AU is addressed in 344-0026.

SOURCE: Case record or agency records.

344-0010 Amt GA/GR Rec Review Month

> **DEFINITION:** Enter the amount of General Assistance or General Relief received by the AU

and/or FSHH in the review month. This amount in a CalWORKs review should

be zero in a correct case, and in most instances will be left blank.

SOURCE: Case record.

344-0011 Correct Review Month Benefits

> DEFINITION: Enter the amount of review month CalWORKs benefits for the type listed in item

344-0022 that should have been received as identified through the review

process.

SOURCE: Field review.

344-0012 Months Received TANF

> **DEFINITION:** Enter the total number of months of TANF cash assistance. Include both TANF

(including received in other states) and all CalWORKs payments. Start with the review month and count back to and including 11/96. The CalWORKs only

count is recorded at item 344-0021.

SOURCE: Case record.

344-0017 Amt Family MAP

> Enter the amount of the family MAP used by the CWD in the budget month. **DEFINITION:**

SOURCE: Case record.

344-0018 Correct Family MAP

> DEFINITION: Enter the amount of the family MAP as identified by the review process.

SOURCE: Field review. 344-0019 Amount of AU MAP

> **DEFINITION:** Enter the amount of the AU MAP used by the CWD in the budget month.

SOURCE: Case record.

344-0020 Correct AU MAP

> **DEFINITION:** Enter the amount of the AU MAP as identified by the review process.

SOURCE: Field review.

344-0021 Months Received CalWORKs

> **DEFINITION:** Enter the total number of months of CalWORKs cash assistance including that

received in any other California county. Start with the review month and count back to and including 1/98. The TANF count is recorded in item 344-0012.

SOURCE: Case record.

344-0022 CalWORKs Received

> **DEFINITION:** Enter the code indicating type of CalWORKs benefits received. If more than one

type has been received in the review month, complete the class for each type.

SOURCE: Case record.

344-0023 Reason for CalWORKs Reduction

> Enter the code indicating the reason for any review month CalWORKs reduction **DEFINITION:**

from MAP for the type of benefit listed in item 344-0022. If there is a reduction based on the reasons coded in item 348-0005 "MAP Reduction Type", enter here as code 99 "Other" and show the amount in item 344-0024 "Amount of

CalWORKs Reduction".

SOURCE: Case record.

344-0024 Amount of CalWORKs Reduction

> Enter the amount of CalWORKs reduction from the review month AU MAP **DEFINITION:**

amount for the type of benefit listed in item 344-0022.

SOURCE: Case record.

CalWORKs Suppl Rec B/M 344-00025

> **DEFINITION:** Enter the amount of any supplemental CalWORKs payment allocated to the

FSHH in the budget month that should have been retrospectively budgeted to

the review month.

SOURCE: Case record.

344-0026 CalWORKs Rec Other AU in Home

> **DEFINITION:** Enter the amount of review month CalWORKs cash assistance received by any

> > other AU(s) in the home that are part of the FSHH under review.

SOURCE: Case or agency records.

Amt CWD Budget CalWORKs for FS 344-0027

> DEFINITION: Enter the amount of CalWORKs cash assistance allocated to the FSHH by the

CWD. This amount may be higher than listed in item 344-0002 if there has been

a reduction due to a sanction in a means tested program (including CalWORKs)

or an IPV in the FS program.

SOURCE: Case record.

344-0028 Correct CalWORKs Budget for FS

DEFINITION:

Enter the amount of CalWORKs cash assistance allocated to the FSHH as identified through the field review process. "Correct" amount does not mean to run a CalWORKs payment accuracy budget, but rather to verify how much CalWORKs the FSHH actually received (plus any penalty amount due to an IPV

or similar sanction).

SOURCE: Field review and case records.

CLASS: 345 - EDU GRANTS, SCHOLARSHIPS, LOAN - ONE PER PERSON

345-0001 School Name

> **DEFINITION:** Enter the name of the educational institution attended in the budget month. If

none, leave blank and proceed to the next class.

SOURCE: Case record.

345-0002 Financial Aid Begin Date

> Enter the begin date for the period of time the loans, scholarships and/or grants **DEFINITION:**

(hereafter referred to as LSG) are intended to cover. Do not consider the receipt

date of LSG whose period expired before the budget month.

SOURCE: Case record.

345-0003 Financial Aid End Date

> **DEFINITION:** Enter the ending date of the financial aid referenced above.

SOURCE: Case record.

345-0005 Income Amount

> **DEFINITION:** Enter the total amount of all scholarships, grants and loans.

SOURCE: Case record.

345-0006 Amount of Fees/Tuition

> DEFINITION: Enter the amount of allowable fees/tuition.

SOURCE: Case record.

345-0007 Allowed Exclusions

> Enter the amount of the educational loans, scholarships, or grants, which were **DEFINITION:**

excluded, from income consideration.

SOURCE: Case record.

345-0008 **Deductible Expenses**

> **DEFINITION:** List deductible expenses allowed.

SOURCE: Case record. 345-0009 Expense Amount

DEFINITION: Enter the amount of funds subtracted from the loan for deductible expenses.

SOURCE: Case record.

345-0010 Rpt Amount of Countable Income

DEFINITION: Enter the amount of countable income reported by this family member in the

budget month. As recipients don't do this, they report the total amount of the LSG when received, obtain data for this item by subtracting item 345-0007 from

item 345-0005 and prorating over the applicable months.

SOURCE: Case record.

345-0013 CWD Budget Month Inc/CalWORKs

DEFINITION: Enter the amount of income used by the CWD in the budget month.

SOURCE: Case record.

345-0014 Correct Budget Mo Inc/CalWORKs

DEFINITION: Enter the amount of budget month income used by the QC reviewer.

SOURCE: Field review.

345-0015 CWD Budget Month Income/FS

DEFINITION: Enter the amount of income used by the CWD in the budget month.

SOURCE: Case record.

345-0016 Correct Budget Month Income/FS

DEFINITION: Enter the amount of budget month income used by the QC reviewer.

SOURCE: Field review.

CLASS: 346 - OTHER UNEARNED INCOME - MANY PER PERSON

346-0001 Type of Other Unearned Income

DEFINITION: Enter the code indicating the type of other unearned income received in the

budget month. Leave blank if none received and proceed to the next class.

SOURCE: Case record.

346-0002 Rpt Amt Recd in Budget Month

DEFINITION: Enter the reported amount of other unearned income received in the budget

month.

SOURCE: Case record.

346-0006 CWD Budget Month Income/FS

DEFINITION: Enter the amount allocated to the FSHH by the CWD.

SOURCE: Case record.

346-0007 Correct Budget Month Inc/FS

DEFINITION: Enter the amount of other unearned income allocated to the FSHH as identified

through the review process.

SOURCE: Field review or third party contact.

346-0008 CWD Budget Month Income/CalWORKs

DEFINITION: Enter the amount used by the CWD.

SOURCE: Case record.

346-0009 Correct Budget Month Inc/CalWORKs

DEFINITION: Enter the amount of other unearned income as identified through the review

process.

SOURCE: Field review or third party contact.

CLASS: 347 - TANF BENEFITS OTHER STATE - ONE PER REVIEW

347-0001 Number Mo Rec Aid in Another State

DEFINITION: If the AU has received TANF in another state(s), list the total number of months

the AU received TANF counting back to and including 11/96 in the previous state(s) of residence. Do not count TANF/CalWORKs received in California.

Leave blank if none received and proceed to the next class.

SOURCE: Case record or field review.

347-0002 Name of State

DEFINITION: If there is an entry in 347-0001, enter the name of the state. If two or more

states, list the last. If entering the state name as indicated in the "TYPE" column

causes an edit, try using the state codes in item 110-0008.

SOURCE: Case record or field review.

347-0003 MAP of Previous Residence

DEFINITION: If there is an entry in 347-0002, enter the MAP amount for that state.

SOURCE: Case record or field review.

347-0004 CWD TANF Recd Other State/RM-AU

DEFINITION: Enter the amount of TANF cash aid received by the AU in the review month from

any state other than California as used by the CWD in computing the AU's

review month assistance.

SOURCE: Case record.

347-0005 Corr TANF Recd Other State/RM-AU

DEFINITION: Enter the amount of TANF cash aid received by the AU in the review month from

any state other than California as used by the QC reviewer.

SOURCE: Field review.

347-0006 CWD TANF Recd Other State/RM-FS

DEFINITION: Enter the amount of TANF cash aid received by the FSHH in the review month

from any state other than California as used by the CWD in computing the

FSHH's review month benefits.

SOURCE: Case record.

347-0007 Corr TANF Recd Other State/RM-FS

DEFINITION: Enter the amount of TANF cash aid received by the FSHH in the review month

from any state other than California as used by the QC reviewer.

SOURCE: Case record.

CLASS: 348 - CalWORKs2 - ONE PER REVIEW

348-0001 Amount of CAL-LEARN Bonus

DEFINITION: Enter the amount of the CAL-LEARN bonus received in the review month.

SOURCE: Case record.

348-0002 Amount of CAL-LEARN Sanction

DEFINITION: Enter the amount of the CAL-LEARN sanction for the review month.

SOURCE: Case record.

348-0005 MAP Reduction Type

DEFINITION: Enter the code to indicate the reason for MAP reduction. The intent is to show

how welfare reform has reduced payments. One way to do that is to reduce the amount of the MAP. As indicated by the codes, there are five ways that the MAP can be reduced in California. First, the Au could be in non-exempt status and therefore subject to the reduced MAP. Second, the recipients can reside in a region two (lower MAP) county. Third, the recipients may be subject to the maximum family grant (MFG) provisions. MFG prevents a child conceived and born while the family is receiving CalWORKs to be added to the MAP level, thus subjecting the AU to a lowered MAP. Fourth, the AU could be subject to a sanction where one or both of the adult members are excluded from the AU. Other penalties involving a percentage reduction are not a lowered MAP. Fifth, the recipients may have recently moved to California from a state with a lower MAP than the county they are currently residing in, thus being subject to the relocation grant provisions. If more than one of the above applies to the AU being reviewed, enter the code based on the following ranking: codes 04, 01, 03, 05, 02. If none of the above applies to the AU being reviewed, then there is

no MAP reduction and this item is to be left blank.

SOURCE: Case record.

348-0006 Reason for Exemption

DEFINITION: Enter the code indicating the reason the AU is exempt from MAP reduction.

Codes 06 Unaided Non-Needy Non-Parent Relative, 17 Unaided Nonparent Caretaker Relative, and 18 Child Not With Parent are essentially the same. Use

code 06, codes 17 and 18 are being deleted in a future version of Q5.

SOURCE: Case record.

348-0009 MBSAC Reduction Type

DEFINITION: Enter the code indicating the type of MBSAC reduction. Unlike MAP reduction

(item 348-0005), there is only one type of MBSAC reduction, living in a region two county. If this is a region two (low MAP - low MBSAC) county review, code

this item "01". If this is a region one review, leave this item blank.

SOURCE: Case record.

348-0012 Months Recd CalWORKs/This Cnty

DEFINITION: Enter the number of months the AU received CalWORKs cash assistance in this

county starting with the review month and going back to and including 1/98.

SOURCE: Case or agency records.

348-0013 Months Recd CalWORKs/Other Cnty

> DEFINITION: Enter the number of months the AU received CalWORKs cash assistance while

> > residing in a different California county back to and including 1/98.

SOURCE: Case and agency records, MEDS.

CLASS: 350 - PYMTS TO CHILD SUPPORT AGENCY - MANY PER REVIEW

350-0001 Amount of Payment

> Enter the amount received by the child support agency from any absent parent(s) for the support of any child in the AU in the budget month. Leave **DEFINITION:**

blank if none received and proceed to the next class.

SOURCE: Case or agency records.

350-0002 Date of Payment

> **DEFINITION:** Enter the month, day and year the child support agency received a child support

payment in the budget month.

SOURCE: Case or agency records.

CLASS: 361 - STANDARD DEDUCTIONS - ONE PER REVIEW

361-0002 F/S Standard Deduction Amount

> **DEFINITION:** Enter the standard deduction amount allowed by the CWD.

SOURCE: Case record.

361-0003 Correct Standard Deduction Amount

> **DEFINITION:** Indicate whether the CWD did (Y) or did not (N) allow the correct standard

deduction amount in the computation of the review month FS allotment.

SOURCE: FS Program Regulations.

CLASS: 363 - SHELTER DEDUCTION - ONE PER REVIEW

363-0001 Paymnt Chge Prior to RM/Cert

> **DEFINITION:** Indicate whether the FSHH did (Y) or did not (N) inform the county of a change

in the cost of its rent/utilities/ mortgage payments in the period between its

certification and/or recertification and the budget month.

SOURCE: Case Record.

363-0002 Addrs Chge Prior to RM/Cert

> **DEFINITION:** Indicate whether the FSHH did (Y) or did not (N) inform the county of a move in

the period between its certification and/or recertification and the budget month.

SOURCE: Case record. 363-0003 Housing Type

> **DEFINITION:** Enter the code indicating the type of housing occupied by the FSHH/AU in the

budget month.

SOURCE: Case record.

363-0004 Rpt Budget Month Housing Cost

> **DEFINITION:** Enter the FSHH's reported housing cost for the budget month. Housing cost

includes in-kind duties, excludes subsidies.

SOURCE: Case record.

363-0005 Housing Verification Source

> Enter the code indicating the source of verification for the amount listed in item 363-0004. **DEFINITION:**

SOURCE: Case record.

363-0006 Shared Housing

> **DEFINITION:** Indicate whether the AU/FSHH is sharing housing costs with either another

household(s) or with excluded members.

SOURCE: Case record.

363-0007 Number of H/H Sharing Housing Cost

Enter the number of <u>households</u> living in the residence that contributed to housing costs in the budget month. Excluded FSHH members do not constitute a "household". **DEFINITION:**

SOURCE: Case record.

363-0008 Number Ineligible Sharing Cost

> Enter the number of persons sharing housing costs in the budget month that **DEFINITION:**

could have been in the FSHH but are excluded.

SOURCE: Case record.

363-0009 Number Non-FSHH Sharing Cost

> DO NOT MAKE AN ENTRY IN THIS ITEM. Items 363-0007 and 363-0008 are **DEFINITION:**

sufficient to cover the required information.

SOURCE: N/A.

363-0010 **CWD Shelter Deduction Amount**

> Enter the shelter deduction amount used by the CWD. This is not the cost of the shelter, but the amount used as a deduction from the FSHH income to arrive at a **DEFINITION:**

net income amount.

SOURCE: Case record budget document

363-0011 Correct Shelter Amount

> Enter the shelter deduction amount identified through the review process. **DEFINITION:**

SOURCE: Field review.

Housing Cost Includes Utility 363-0012

> Indicate whether the shelter cost does (Y) or does not (N) include utilities as of **DEFINITION:**

the budget month. If "Y", skip to item 363-0025 and continue, also skip class

SOURCE: Case record.

363-0013 Actual Expenses Chosen

> **DEFINITION:** Indicate whether the FSHH chose actual utility expense. SUA must be "chosen"

to be allowed. If there is no documentation in the FS certification/recertification document of a choice made by the FS applicant/recipient, assume "actuals", provided the FSHH incurred utility expenses, provided verification, and was eligible for the utility deduction. If the FSHH did not choose actual utility expenses (and chose SUA), enter "N" and complete all other items in this class except items 363-0021, 363-0022, and 363-0024.

SOURCE: Case record.

363-0015 **Amount Billed**

> Enter the budget month utility expenses incurred by the FSHH. Use this item for **DEFINITION:**

documenting both the amount of actual expenses and to record the utility expense for federal reporting requirements.

SOURCE: Field review.

363-0017 **Utility Shared**

> **DEFINITION:** Indicate whether the FSHH shares utility costs with another household or

excluded FSHH members. If 'Y' proceed to the next item, if 'N' go to 363-0021.

SOURCE: Case record.

363-0018 Number of H/H Sharing Utility Cost

> **DEFINITION:** Enter the figure for the total number of households living in the residence that

contributed to the utility payments in the budget month. Excluded FSHH

members do not constitute another "household".

SOURCE: Case record.

363-0019 Number Ineligible Sharing Utility Cost

> **DEFINITION:** Enter the number of persons contributing to utility costs in the budget month that

could be in the FSHH but are excluded.

SOURCE: Case record.

363-0020 Number Non-FSHH Sharing Util Cost

> DO NOT MAKE AN ENTRY IN THIS ITEM. Items 363-0018 and 363-0019 are **DEFINITION:**

> > sufficient to cover the required information.

SOURCE: N/A.

363-0021 CWD Utility Deduction Amt

> Enter the amount of the "actual utility deduction" used by the CWD in **DEFINITION:**

determining the review month's allotment. If the FSHH chose SUA, leave this

item blank.

SOURCE: Case record. 363-0022 Correct Utility Deduction amt

DEFINITION: Enter the amount that the county should have allowed for the FSHH's "actual

utility deduction" in the budget month. If the FSHH chose SUA, leave this item

blank.

SOURCE: Field review.

363-0023 Homeless Standard Deduction

DEFINITION: Enter the amount of the homeless standard deduction used by the CWD.

SOURCE: Case record.

363-0024 Utility Cost Verified

DEFINITION: Indicate whether utility cost was (Y) or was not (N) verified for a FSHH choosing

actuals.

SOURCE: Case record.

363-0025 STD Telephone Allow Chosen

DEFINITION: Indicate whether the CWD allowed the standard telephone allowance as a

deduction.

SOURCE: Case record.

363-0026 Number of H/H in Residence

DEFINITION: Enter the number of households living in the FSHH residence. Excluded FSHH

members do not constitute a "household".

SOURCE: Case record.

363-0027 Preliminary Net Income

DEFINITION: Enter the amount the CWD obtained by taking the gross income and subtracting the earned income deduction, the standard deduction, medical costs exceeding

the earned income deduction, the standard deduction, medical costs exceeding the limit for households with elderly or disabled members, dependent care costs

up to the maximum allowable, and the actual child support

payment deduction.

SOURCE: Case record.

363-0028 Correct Pre Net Inc

DEFINITION: Enter the amount of preliminary net income as computed by the QC reviewer.

SOURCE: Field review.

363-0029 Actual Excess Shelter Cost

DEFINITION: Enter the amount the CWD obtained by taking the total shelter costs (including

actual utilities or SUA as appropriate) less one/half of the preliminary net

income.

SOURCE: Case record.

363-0030 Correct Act Ex Shelter Cost

DEFINITION: Enter the actual excess shelter cost as computed by the QC reviewer.

SOURCE: Field review.

363-0031 Allowable Ex Shelter Cost

DEFINITION:

Enter the amount of allowable excess shelter cost as computed by the CWD. This is the actual excess shelter cost compared to the maximum limit for shelter deduction. If there are disabled or elderly FSHH members, the allowable the actual. If there are no disabled or elderly FSHH members, the allowable excess shelter cost should never exceed the maximum limit as set by Federal

regulation.

SOURCE: Case record.

363-0032 Correct Allow Ex Shel Cost

> **DEFINITION:** Enter the amount of allowable excess shelter cost as computed by the QC

reviewer.

SOURCE: Field reviewer.

CLASS: 364 - STANDARD UTILITY ALLOWANCE - ONE PER REVIEW

364-0001 SUA Selected

> **DEFINITION:** Indicate whether the FSHH elected SUA. If there is no documentation of the

FSHH electing SUA, the answer is "no".

SOURCE: Case record.

364-0002 Utility Cost Verified

> **DEFINITION:** Indicate again whether the utility cost was verified.

SOURCE: Case record.

364-0003 Used for Heat/Cooling

> **DEFINITION:** Indicate whether any of the billed utilities are used for heating or cooling the

> > residence.

SOURCE: Case record.

364-0004 **SUA Prorated**

> **DEFINITION:** Indicate whether the SUA was prorated by the CWD.

SOURCE: Case record.

364-0005 **CWD Utility Deduction Amount**

> Enter the SUA allowed by CWD. **DEFINITION:**

SOURCE: Case record.

364-0006 Correct SUA Deduction Amount

> **DEFINITION:** Enter the SUA amount identified in the review process.

SOURCE: Field review.

CLASS: 365 - MEDICAL EXPENSE DEDUCTION - ONE PER REVIEW

365-0001 Claim Medical Expenses

> Indicate whether the FSHH did (Y) or did not (N) claim a medical deduction in the budget month. If the FSHH did not incur an allowable medical expense **DEFINITION:**

deduction, leave this item blank and skip the rest of the class.

SOURCE: Case record.

365-0002 **Unreported Med Expenses**

> Indicate whether the FSHH did (N) or did not (Y) incur an unreported medical **DEFINITION:**

expense during the review period.

SOURCE: Field review.

365-0003 60 Years or Older

> **DEFINITION:** Indicate whether the FSHH contains a member that is 60 years of age or older in

the budget month.

SOURCE: Case record.

365-0004 Disabled

> **DEFINITION:** Indicate whether the FSHH contains a member that is disabled in the budget

month.

Case record. SOURCE:

365-0005 Disability Verified

> **DEFINITION:** Indicate whether the disability has been verified. Disability is verified by a

doctor's statement of incapacity or the receipt of disability based benefits (SDI,

SSI, etc).

SOURCE: Case record.

365-0006 **Budget Mon Medical Expenses**

> **DEFINITION:** Enter the amount of budget month expense claimed by the FSHH.

SOURCE: Case record.

365-0007 **Expenses Verified**

> DEFINITION: Indicate whether the budget month medical expenses were verified.

SOURCE: Case record.

365-0008 Medical Expense Start Date

DEFINITION: Enter the month, day and year of the beginning of the allowable medical

expenses if they impact the review period.

SOURCE: Case record.

365-0009 Medical Expense Stop Date

DEFINITION: Enter the month, day and year of the cessation of the need for the medical

deduction. If the need is ongoing, enter the date of the end of the certification

period.

SOURCE: Case record.

365-0010 Reimbursements Received

DEFINITION: Indicate whether any allowable budget month medical expenses were

reimbursed.

SOURCE: Case record.

365-0011 CWD Deduction Allowed

DEFINITION: Enter the amount of the medical deduction allowed by the CWD.

SOURCE: Case record.

365-0012 Correct Amount of Deduction

DEFINITION: Enter the medical deduction amount identified by the review process.

SOURCE: Field review.

CLASS: 366 - CHILD SUPPORT DEDUCTION - ONE PER PERSON

366-0002 Amt. of Obligated Support

DEFINITION: Enter the amount of the court ordered monthly support.

SOURCE: Court order.

366-0003 Payment Made By

DEFINITION: Enter the person number of the person required by the court order to pay

support.

SOURCE: Court order.

366-0004 Payment Received By

DEFINITION: Enter the name of the person receiving the support payment.

SOURCE: Court order.

366-0005 Name of Child Payment is For

DEFINITION: Enter the name of the child being supported.

SOURCE: Court order.

366-0006 Amt Paid in Budget Month

DEFINITION: Enter the amount of support paid in the budget month.

SOURCE: Case record or field review.

366-0008 Time Period Covered By Paymt

DEFINITION: Enter the month(s) and year covered by the payment referenced in item 366-

0006.

SOURCE: Case record or field review.

366-0009 Verification Document

DEFINITION: Enter the code indicating the documentation used for verification.

Case record or court/other agency records. SOURCE:

366-0010 **CWD Budgeted Amount**

> **DEFINITION:** Enter the court ordered child support deduction used by the CWD.

SOURCE: Case record.

366-0011 Correct Budget Amount

> **DEFINITION:** Enter the court ordered child support deduction as determined by the review

> > process.

SOURCE: Field review.

366-0012 Legally Req'd to Pay Chld Supt

> **DEFINITION:** Enter the code indicating whether there is a court order for this person to pay

child support in the budget month to a child not in the household. The person paying must be either a FSHH member or someone contributing income to the

FSHH. If not, leave blank and proceed to the next class.

SOURCE: Case record or field review.

CLASS: 371 - COMBINED GROSS INCOME - ONE PER REVIEW

371-0001 Total Gross Income-FS

DEFINITION:

Enter total gross income to the FSHH from all sources received in the budget month. This sum is the total of 371-0009 and 371-0010. Then add review month CalWORKs/GA. Include only CalWORKs payments that are countable to the food stamp budget, e.g., payments for transportation are reimbursements

and not countable.

SOURCE: Field review.

371-0002 **GIET Amount**

> **DEFINITION:** Enter the maximum gross income allowable for the verified FSHH size.

SOURCE: FS regulations.

371-0003 BM Gross Exceed Limit/FS?

> Indicate whether the budget month gross income of the FSHH does (Y) or does DEFINITION:

not (N) exceed the FS program gross income limit.

SOURCE: FS Program Regulations.

Total Unearned Income/FS 371-0009

> Enter the gross unearned income allocated to the FSHH in the budget month. **DEFINITION:**

Do not include CalWORKs or GA as they are included in item 371-0001.

SOURCE: Field review.

371-0010 Total Earned Income/FS

> **DEFINITION:** Enter the gross earned income allocated to the FSHH in the budget month.

SOURCE: Field review. 371-0012 Total Unearned Income/CalWORKs

> **DEFINITION:** Enter the gross unearned income received by the CalWORKs family in the

budget month. Do not include the CalWORKs grant.

SOURCE: Field review.

371-0013 Total Earned Income/CalWORKs

> Enter the gross earned income received by the CalWORKs family in the budget **DEFINITION:**

month.

SOURCE: Field review.

371-0014 Total Gross Income/CalWORKs

> Enter the gross income to the CalWORKs family from all sources in the budget **DEFINITION:**

month. This amount is the sum of 371-0012 plus 371-0013. Do not count the

CalWORKs grant/benefits.

SOURCE: Field review.

CLASS: 372 - COMBINED NET INCOME - ONE PER REVIEW

372-0002 Max Net Inc For Verified FSHH

> DEFINITION: Enter the maximum net income (NIET) allowable for the verified FSHH size.

SOURCE: Current Net Income Tables.

372-0004 Net Income/Food Stamps

> DEFINITION: Enter the amount of net income allocated to the FSHH in the budget month.

SOURCE: Field review.

Net Income/CalWORKs 372-0005

> **DEFINITION:** Enter the amount of net income received by the CalWORKs family in the budget

month.

SOURCE: Field review.

CLASS: 411 - MEDICAL/DISABLED - ONE PER PERSON

411-0001 Aided Person Disabled

DEFINITION:

Indicate whether this aided (CalWORKs) person is disabled. The definition of disabled for the purposes of this class is that the person is receiving assistance under the disability portion of Title II OASDI (Old Age and Survivor's Disability Insurance: Old Age = Social Security retirement; Survivors = death benefits to surviving spouse and children; Disability = disability payments to wage earners with a disability expected to last one year of more.), Title XIV APDT (Title XIV monies are grants to the state to provide aid to persons with a total and permanent disability), Title XVI AABD (all Title XVI is SSI. AA and BD are designators indicating the type of living arrangement for the recipient, e.g.,

independent living, assisted living, share of cost, etc.), or Title XVI SSI.

SOURCE: Case record.

411-0002 Aided Adult Incapacitated **DEFINITION:** Indicate whether this incapacitated adult is receiving CalWORKs. The definition

of an incapacitated adult for the purposes of this class is that the adult has a physical or mental incapacity that prevents or substantially reduces his/her ability to engage in work, training, and/or provide necessary care for his/her child(ren) and the incapacity is expected to last longer than 30 days. The determination that incapacity exists shall take into consideration the limited employment opportunities of handicapped individuals and be based on a finding of eligibility for some type of benefits based upon the adult's disability or blindness verified by the authorizing agency and the verification is adequately documented in the

SOURCE: Case record.

case record.

411-0006 Cares for Severely Disabled Ch

> **DEFINITION:** Indicate whether this aided adult cares for a severely disabled child. The

definition of a severely disabled child for the purposes of this item is that the child is physically or mentally incapable of caring for himself/herself based on a written statement of a physician or a licensed or certified psychologist or receipt of SSI/SSP and meets the age requirements as specified in MPP 42-100. The

disabled child may or may not attend school.

SOURCE: Case record.

CLASS: 412 - TITLE 19 - ONE PER REVIEW

Receives Title 19 Assistance 412-0001

> Indicate whether any AU member has an activated Medi-Cal card for the review **DEFINITION:**

month. It is not necessary for the card to have been used.

SOURCE: MEDS screen or case record.

412-0003 Months of Title 19 Assistance

> Enter the total number of months the AU member received any Title 19 benefits **DEFINITION:**

starting with the review month and counting back to and including 11/96. Count

for the AU member with the longest history of title 19 receipt.

SOURCE: Case record or MEDS screen.

CLASS: 413 - BASIC BUDGETARY ALLOWANCES - ONE PER REVIEW

413-0001 Declared Free Items of Need

> **DEFINITION:** Indicate whether the AU did/did not report receipt of free food, housing, utilities

or clothing in the budget month.

SOURCE: Case record.

413-0002 Value of Income-in-Kind

> **DEFINITION:** Enter the dollar amount of any IIK received by the AU in the budget month.

SOURCE: Case record or field review.

413-0005 Receives Subsidized Housing

DEFINITION:

Indicate whether the AU received any type of housing subsidy in the budget month. Housing subsidies include Section 8 housing subsidies, housing projects and low rent programs administered by public entities. The amount of subsidy is

indicated in the Section 8 contract. It may be difficult if not impossible to

determine in other instances.

Contact the administrative entity to obtain a fair market value for the housing. Subtract the amount billed to the recipients. Enter that figure in item 413-0007. If no fair market value is available and there is no way to determine the amount of the subsidy, leave 413-0007 blank. No edit will result. Complete item 413-0006.

SOURCE: Case record or field review.

413-0006 Months of Subsidized Housing

DEFINITION: Enter the number of months back to and including 11/96 the AU has received a

housing subsidy. Start with the review month.

SOURCE: Case record or field review.

413-0007 Amount of Subsidized Housing

DEFINITION: Enter the amount of any housing subsidies provided to or on behalf of the AU in

the budget month.

SOURCE: Case record or field review.

413-0008 Restricted Status

DEFINITION: Indicate if the grant payment is issued as a two-party or vendor payment.

SOURCE: Case record.

413-0009 Type of Restricted Status

DEFINITION: If the case is in restricted status, state the reason this status has been imposed

(money management, adult protective, etc.).

SOURCE: Case record.

413-0011 Housing Voucher

DEFINITION: Indicate whether the AU did (Y) or did not (N) receive a housing voucher in the

budget month.

SOURCE: Case record.

413-0012 Amount of Housing Voucher

DEFINITION: Enter the amount of the budget month housing voucher.

SOURCE: Case record.

413-0014 Utility Voucher

DEFINITION: Indicate whether the AU did (Y) or did not (N) receive a utility voucher in the

budget month.

SOURCE: Case record.

413-0015 Amt of Utility Voucher

DEFINITION: Enter the amount of the budget month utility voucher.

SOURCE: Case record.

413-0016 Other Vouchers

DEFINITION: Indicate whether the AU did (Y) or did not (N) receive a budget month voucher(s)

for other than housing or utilities.

SOURCE: Case record.

413-0017 Amt of Other Vouchers

> DEFINITION: Enter the amount of the budget month other voucher(s).

SOURCE: Case record.

CLASS: 420 - SPECIAL CIRCUMSTANCE ALLOWANCE - MANY PER PERSON

420-0001 Special Need Allowed

> **DEFINITION:** Indicate whether any special need benefits were received in the review month. If

> > none received, leave blank and skip this class.

Case record. SOURCE:

420-0004 Type of Special Need

DEFINITION:

Enter the code indicating the type of special need allowance received in the review month. Code 03 "transportation" does not apply to WTW transportation services, those are addressed in item 344-0022 code 03. These transportation

special circumstances are for transportation to dialysis, etc.

SOURCE: Case record.

420-0005 Amount of Special Need

> **DEFINITION:** Enter the amount of special need allowance received in the review month.

SOURCE: Case record.

420-0006 Special Need Verified

> **DEFINITION:** Indicate whether there is case record verification for the special need allowance.

SOURCE: Case record.

Last Trimester AORD 420-0008

> **DEFINITION:** Indicate whether the recipient of PSN was in the last trimester of pregnancy

AORD.

SOURCE: Case record.

CLASS: 421 - HOMELESS ASSISTANCE - ONE PER REVIEW

421-0010 Homeless AORD

> **DEFINITION:** Indicate whether the AU was homeless AORD.

SOURCE: Case record.

421-0011 Homeless Assistance Payment

> Enter the dollar amount of the HAP issued for the review month. **DEFINITION:**

SOURCE: Case record. 421-0013 Times recd Homeless Assist

DEFINITION: Enter the number of times the AU has received HAP.

SOURCE: Case record and HAPI file.

CLASS: 520 - ARITHMETIC COMPUTATION - ONE PER REVIEW

520-0001 FS Amt Authorized for SM

DEFINITION: Enter the amount of FS authorized (prior to any OI adjustment) for the sample

month (SM). Sample month = review month.

SOURCE: Case record.

520-0002 Authorization Date

DEFINITION: Enter the month, day, and year the review month's allotment was authorized.

For change reporting households it is either the certification date or the date a reported change was acted on, whichever is later. For monthly reporting households it is either the certification date, the date the allotment was authorized to be changed, or the date a "no change" CA 7 was processed by the

EW, whichever is later.

SOURCE: Case record.

520-0003 ATP Number

DEFINITION: If food stamp benefits were issued via an ATP, enter the ATP number.

SOURCE: Agency records.

520-0004 Redemption Date

DEFINITION: Enter the month and year the review month ATP was redeemed.

SOURCE: Agency records.

520-0005 FS Sup Amt Auth for SM

DEFINITION: If issued, enter the amount of supplemental FS benefits issued for the review

month.

SOURCE: Case record.

520-0006 Authorization Date

DEFINITION: Enter the month, day, and year the supplemental issuance was authorized.

SOURCE: Case record.

520-0007 ATP Number

DEFINITION: If the supplemental issuance was issued via an ATP, enter the supplemental

ATP Number.

SOURCE: Agency records.

520-0008 Redemption Date

DEFINITION: Enter the month, day, and year the supplemental ATP was redeemed.

SOURCE: Agency records.

520-0009 Was There a Break in Aid?

DEFINITION: Indicate whether there was a break of over thirty days in the receipt of FS

benefits that would impact the budgeting method for the review month.

SOURCE: Case records.

520-0011 Transcription Error

DEFINITION: Indicate whether a transcription error exists in the benefit computation for the

review month.

SOURCE: Case record.

520-0012 Fiscal Claiming for RISP

DEFINITION: Indicate whether the RISP was paid with anything other than state funds.

SOURCE: Case record.

520-0013 Arithmetic Error

DEFINITION: Indicate whether an arithmetic error exists in the benefit computation for the

review month.

SOURCE: Case record.

520-0014 Amount of Error

DEFINITION: Enter the amount in whole dollars of the arithmetic/transcription error for the

review month.

SOURCE: Case record and field review.

520-0015 Overpayment Recoupment

DEFINITION: Indicate whether there is an overpayment recoupment in the review month.

SOURCE: Case record.

520-0016 Amount of Recoupment

DEFINITION: Enter the amount in whole dollars of the review month recoupment.

SOURCE: Case record.

520-0017 Start Date of Recoupment

DEFINITION: Enter the month, day, and year of the start of the recoupment if recoupment

(dollars deducted from the grant) is in effect during the review month.

SOURCE: Case record.

520-0018 End Date of Recoupment

DEFINITION: Enter the month, day, and year of the end of the recoupment if recoupment

(dollars deducted from the grant) is in effect during the review month. If the end date is not specified, this item can be left blank. In an error case, the end date

may be prior to the review month.

SOURCE: Case record.

520-0019 Correct Amt Recouped

DEFINITION: Indicate whether the CWD recouped the correct amount AORD as identified in

the review process.

SOURCE: Field review.

CLASS: 525 - FOOD STAMPS - ONE PER REVIEW

525-0002 Total Amount of F/S Received

DEFINITION: Enter the dollar amount of food stamps received by the AU the review month.

Received means usable benefits, i.e., after all OI adjustments, etc.

SOURCE: Case record.

525-0003 Number of Months F/S Received

DEFINITION: Enter the number of months that the AU has received food stamps back to and

including 11/96. Start with the review month.

SOURCE: Case record.

525-0004 Reason Chose No F/S

DEFINITION: Enter the code indicating the reason the family has not applied for food stamps.

SOURCE: Field review.

525-0006 Receives F/S

DEFINITION: Enter the code to indicate whether or not the AU is receiving food stamps. If not,

item 525-0004 should also be completed.

SOURCE: Case record.

CLASS: 560 - MONTHLY REPORTING - ONE PER REVIEW

560-0001 Reporting Status

DEFINITION: Enter the code indicating the FSHH's reporting status.

SOURCE: Case record.

560-0002 Budgeting Process Used by CWD.

DEFINITION: Enter the code indicating the budgeting process used by CWD.

SOURCE: Case record.

560-0003 Correct Budgeting By CWD

DEFINITION: Indicate whether the CWD used the correct budgeting method.

SOURCE: Field review.

560-0004 Date Monthly Report Signed

DEFINITION: Enter the month, day, and year the budget month income report was signed by

the recipient.

SOURCE: Case record.

560-0005 Date Received

DEFINITION: Enter the month, day, and year the budget month income report was initially

received by the agency. If there are completeness and/or timeliness issues, note in the following two items as appropriate and document in the narrative

section.

SOURCE: Case record.

560-0006 Report Complete

DEFINITION: Indicate whether the budget month income report was complete. If the report

was not initially complete but became so prior to the end of the allowable time

period and had no effect on the budget, answer " "Y".

NOTE: Effective with the January 1, 1998 sample, completeness and timeliness will no longer have an effect on the budget in terms of disallowed deductions. All

deductions will be allowed to earned income in every instance.

SOURCE: Case record.

560-0007 Report Timely

DEFINITION: Indicate whether the budget month income report was received timely by the

CWD. "Timely" means by the end of the allowable time period. See the "NOTE"

in the prior item.

SOURCE: Case record.

CLASS: 020 - FS ERROR IDENTIFICATION - ONE PER REVIEW

The error codes and descriptions for classifying FS errors are adopted from federal coding. Thus, while the Q5 class numbers generally are the same as the federal Integrated Report Schedule (IRS) element numbers, there are a few differences (e.g., Q5 Class 164 is ABAWD; IRS 164 is Workfare and Comparable Workfare. Q5 Class 344 is CalWORKs; IRS 344 is PA or GA).

Reviewers should classify errors according to the federal numbering/categories without trying to relate to Q5 classes. The error class codes (020-0002) and the nature codes (020-0003) are based on USDA-FNS coding options.

020-0001 FS Error Amount/Fed Prog

DEFINITION: Enter the net dollar amount for all federal program FS errors in the case. The

CFAP error amount is captured in item 020-0011.

SOURCE: Field review.

020-0002 Error Class Code

DEFINITION: Enter the code indicating the category of the primary error. The primary error is

the one with the largest dollar variance.

SOURCE: Field review

020-0003 Error Nature Code

DEFINITION: Enter the code indicating the nature of the primary error. The first three numbers

must match the federal category number cited in the above item.

SOURCE: Field review.

020-0004 Error Cause Code

DEFINITION: Enter the code indicating the error cause.

SOURCE: Field review.

020-0006 Error Discovery Code

> **DEFINITION:** Enter the code indicating how the error was discovered.

SOURCE: Field review.

020-0007 **Error Verification Code**

> **DEFINITION:** Enter the code indicating how the error was verified.

SOURCE: Field review.

020-0008 Error Occurrence Date

> Enter the month and year in which the error first occurred. Depending on circumstances, this could be months or even years in the past. It is the month **DEFINITION:**

and year the error conditions first existed in the case under review.

SOURCE: Case record and/or field review.

020-0009 Time Period

> **DEFINITION:** Enter the code indicating the time period in which the error occurred.

SOURCE: Field review.

020-0011 FS Error Amt/CFAP

> **DEFINITION:** Enter the net dollar amount for all CFAP errors in the case. The federal program

error amount is captured in item 020-0001.

SOURCE: Field review.

CLASS 040 - CalWORKs ERROR IDENTIFICATION - ONE PER REVIEW

040-0002 Error Class Code

> **DEFINITION:** Enter the code indicating the category of the primary error. The primary error is

the one with the largest dollar variance.

SOURCE: Field review.

040-0003 **Error Nature Code**

> **DEFINITION:** Enter the code indicating the nature of the primary error. The first three numbers

must match the category number cited in the above item.

SOURCE: Field review.

040-0004 Error Cause Code

> Enter the code indicating the cause of this error. Codes 01 through 04 are client caused codes, 10 through 20 are agency caused. **DEFINITION:**

SOURCE: Field review.

Error Discovery Code 040-0005

> **DEFINITION:** Enter the code indicating the information source that led to the discovery of a

payment error.

SOURCE: Field review.

040-0007 **Error Verification Code**

> **DEFINITION:** Enter the code indicating the information source that verified the discovery of a

payment error.

SOURCE: Field review.

040-0008 **Error Occurrence Date**

> Enter the month and year the payment error initially occurred. Depending on circumstances, this could be months or even years in the past. It is the month **DEFINITION:**

and year the error conditions first appeared in the case under review.

SOURCE: Field review.

040-0009 Time Period

> **DEFINITION:** Enter the code indicating the time period in which the error occurred.

SOURCE: Field review.

040-0010 CalWORKs Error Amount

> **DEFINITION:** Enter the net dollar amount for all CalWORKs errors in the case.

SOURCE: Field review.

CLASS: 760 - CalWORKs - CLOSED CASES - ONE PER REVIEW

760-0001 Case Disposition

DEFINITION:

Enter the code indicating the case disposition. The initials "NSDC" mean "Not Subject to Data Collection". The codes split out the closed cases into two types, terminations (discontinuances) and denials. If you enter either of the NSDC

codes, stop with that and make no further entries in this class.

SOURCE: Field review.

760-0002 Reason for Termination

> **DEFINITION:** Enter the code indicating the reason for termination.

> > CODE 01: Member of the household finds employment. Code 01 requires follow-up efforts to contact the HH.

> > CODE 02: Member of CalWORKs household marries and the household no longer needs CalWORKs.

> > CODE 03: Five year time limit. The HH has received CalWORKs for 60 months.

CODE 04: Sanction. This can be a number of reasons related to how CalWORKs is implemented among respective counties.

CODE 05: State (Tribal) Policy. There are Native American Tribes administering block grant programs in California.

CODE 06: Minor child absent from the home for a significant time period. This period will be determined by either State policy or respective county plan provisions.

CODE 07: Transfer to state separate maintenance of effort (MOE) program. There are presently no active MOE programs in California.

CODE 08: Other. Requires follow-up contact efforts.

CODE 09: Increased earnings. Code this for situations where an employed CalWORKs recipient begins to earn enough income to go off the CalWORKs

program. Code 09 will be reported to ACF as 01 (employment).

Codes 10 through 30 are self-explanatory.

SOURCE: Case record.

760-0005 Earnings Per Month

DEFINITION:

Enter the amount of earnings for the month that caused termination from CalWORKs. If the amount is unknown (e.g., only one weekly check stub is available), enter the amount using your professional judgement that best

represents the monthly amount.

SOURCE: Case record or field review.

760-0007 Avrg Hours Worked Per Week

> **DEFINITION:** Enter the code indicating whether the employment causing termination was

either 40 hours (or more) per week (code 01), or under 40 hours (code 02).

SOURCE: Case record or field review.

760-0009 Reason for Denial

> **DEFINITION:** If the application for CalWORKs was denied, enter the code indicating the

reason.

SOURCE: Case record.

CLASS: 780 - CASE REVIEW FINDINGS - ONE PER REVIEW

780-0001 Case Disposition

> **DEFINITION:** Enter the code indicating the disposition of the negative case review. If code 2

(NSTR), stop, do not compete classes 781 or 782.

SOURCE: Field review.

CLASS: 781 - FS DENIED/TERMINATED CASES - ONE PER REVIEW

781-0001 **Decision Date**

> **DEFINITION:** Enter the month, day, and year the decision to take negative action was made.

SOURCE: Case record, FS budget document, NOA.

781-0002 Effective Date

> **DEFINITION:** Enter the month, day, and year the negative action became effective. For

denials it will be the date of the denial Notice of Action (NOA), for terminations the first day of the month in which benefits were not received. For denials, the decision date and the effective date will be the same; for terminations the

decision date will be prior to the effective date.

SOURCE: Case record.

781-0003 Action Type DEFINITION: Enter the code indicating whether the case was denied or terminated.

SOURCE: Case record, NOA, FS budget, chron. notes.

781-0004 Class Classification

DEFINITION: Enter code 03 if the case is in: Amador; Contra Costa; Fresno; Lake; Mariposa;

Modoc; Monterey; Nevada; Sacramento; San Bernardino; San Francisco; San Luis Obispo; Santa Barbara; Santa Clara; Santa Cruz; Solano; or Sonoma counties (see REB Transmittal 97-2 (F) dated June 2, 1997). All other counties

enter code 01.

SOURCE: Case record.

CLASS: 782 - REVIEW ANALYSIS - ONE PER REVIEW

782-0001 Notice Requirement Code

DEFINITION: Enter the code indicating whether the FSHH received timely notice (CWD

compliance with 10 day notice requirements).

SOURCE: Case record, NOA, chron. notes.

782-0002 CWD Reason for Action

DEFINITION: Enter the code indicating the reason the CWD took the negative action. If code

11, 12, or 99, you will need to follow-up with the HH in order to code items 782-

0005, 0006, 0007, and 0009, if present.

NOTE: These codes are identical to the codes listed in the full text of

Appendix A, codes for denial or termination (FS only) in the

FCS Handbook for Negative Actions.

SOURCE: Case record.

782-0003 Validity of Recorded Reason

DEFINITION: Enter the code indicating whether the negative action was valid or invalid and/or

unable to determine from the case record information.

SOURCE: Field review.

782-0004 Results of Expanded Review

DEFINITION: Enter the code indicating negative action validity as determined by the expanded

review process (if required).

SOURCE: Field review.

782-0005 Terminated Due to Employment

DEFINITION: Enter the code indicating whether the case has been terminated from food

stamps due to employment. The employed person would not necessarily have to have been a FSHH member, e.g., return to work by an ineligible alien family

member. If coded "Yes" (code 01), complete the rest of this class.

SOURCE: Case record or field review.

782-0006 Earnings Per Month

DEFINITION: Enter the amount of earnings for the month that caused the termination. If the

monthly amount is not known (e.g., only one weekly check available), enter the amount using your professional judgement that best represents the monthly

amount.

SOURCE: Case record or field review.

782-0008 Reason for Action/if Different

> Enter the code indicating the reason for the termination action if it is different from that listed in item 782-0002. **DEFINITION:**

SOURCE: Field review.

782-0009 Avrg Hours Worked Per Week

> Enter the code indicating whether the employment causing termination was either 40 hours (or more) per week (code 01), or under 40 hours (code 02). **DEFINITION:**

SOURCE: Case record or field review.

CLASS: 783 - DESC OF VARIANCES - NATURE CODE - MANY PER REVIEW

783-0001 Element Code

> Enter the code indicating the category in which the variance was found. Complete this class for each variance. **DEFINITION:**

SOURCE: Field review.

783-0002 Nature Code

> Enter the code indicating the nature of the variance cited in item 783-0001. **DEFINITION:**

SOURCE: Field review.